

# Our Lady of Grace Catholic Church

9900 E 191st St, Noblesville, IN 46060

(317) 773-4275 • (317) 773-9344 fax • ChurchOffice@ologn.org

## Family Registration

### Head of Household

Last Name:		First & Middle Name:	/					
Maiden Name:		Nickname:						
Street Address:								
City:		State:		Zip:				
Cell Phone:	( )	Emergency Phone:	( )					
Home Phone:	( )	Work Phone:	( )					
Email Address:								
Occupation:		First Language:						
Employer:		Male/Female:						
DOB:	/ /	Marital Status:						
	(mm/dd/yyyy)		(Single, Married, Separated, Divorced, Annulled, Widowed)					
Catholic?	<input type="checkbox"/>	Have you received:	Baptism?	<input type="checkbox"/>	First Eucharist?	<input type="checkbox"/>	Confirmation?	<input type="checkbox"/>

### Other Adults in Same Household

Relationship to Head:		(Spouse, Parent, Sibling, etc.)						
Last Name:		First & Middle Name:	/					
Maiden Name:		Nickname:						
Cell Phone:	( )	Work Phone:	( )					
Email Address:								
Occupation:		First Language:						
Employer:		Male/Female:						
DOB:	/ /	Marital Status:						
	(mm/dd/yyyy)		(Single, Married, Separated, Divorced, Annulled, Widowed)					
Catholic?	<input type="checkbox"/>	Have you received:	Baptism?	<input type="checkbox"/>	First Eucharist?	<input type="checkbox"/>	Confirmation?	<input type="checkbox"/>

Relationship to Head:		(Spouse, Parent, Sibling, etc.)						
Last Name:		First & Middle Name:	/					
Maiden Name:		Nickname:						
Cell Phone:	( )	Work Phone:	( )					
Email Address:								
Occupation:		First Language:						
Employer:		Male/Female:						
DOB:	/ /	Marital Status:						
	(mm/dd/yyyy)		(Single, Married, Separated, Divorced, Annulled, Widowed)					
Catholic?	<input type="checkbox"/>	Have you received:	Baptism?	<input type="checkbox"/>	First Eucharist?	<input type="checkbox"/>	Confirmation?	<input type="checkbox"/>

Please fill in all blank boxes. If you have additional adults in household, please use a second form.

### See Reverse for Children in Same Household

Our Lady of Grace uses [www.FaithDirect.net](http://www.FaithDirect.net) for electronic giving. (Our code is IN87.)

Would you like to receive information about Faith Direct? \_\_\_\_\_

Would you like to receive weekly contribution envelopes instead of Faith Direct? \_\_\_\_\_

Would your household like to receive the Catholic Moment magazine? \_\_\_\_\_

(It is free. We encourage you to donate \$22 to cover the cost to the parish for your subscription.)

Are there any members of your household who would like to be visited by a priest? \_\_\_\_\_

Are there any members of your household in need of a sacrament? \_\_\_\_\_

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## Family Registration

### Dependent Children in Same Household

Relationship to Head:  (Child, Grandchild, Sibling, etc.)

Last Name:  First & Middle Name:  /

DOB:  /  /  (mm/dd/yyyy) Nickname:

Birthplace:  Male/Female:

First Language:  Phone:

Current School:  Email:

Catholic?  Have you received:  Baptism?  First Eucharist?  Confirmation?

Relationship to Head:  (Child, Grandchild, Sibling, etc.)

Last Name:  First & Middle Name:  /

DOB:  /  /  (mm/dd/yyyy) Nickname:

Birthplace:  Male/Female:

First Language:  Phone:

Current School:  Email:

Catholic?  Have you received:  Baptism?  First Eucharist?  Confirmation?

Relationship to Head:  (Child, Grandchild, Sibling, etc.)

Last Name:  First & Middle Name:  /

DOB:  /  /  (mm/dd/yyyy) Nickname:

Birthplace:  Male/Female:

First Language:  Phone:

Current School:  Email:

Catholic?  Have you received:  Baptism?  First Eucharist?  Confirmation?

Relationship to Head:  (Child, Grandchild, Sibling, etc.)

Last Name:  First & Middle Name:  /

DOB:  /  /  (mm/dd/yyyy) Nickname:

Birthplace:  Male/Female:

First Language:  Phone:

Current School:  Email:

Catholic?  Have you received:  Baptism?  First Eucharist?  Confirmation?

Relationship to Head:  (Child, Grandchild, Sibling, etc.)

Last Name:  First & Middle Name:  /

DOB:  /  /  (mm/dd/yyyy) Nickname:

Birthplace:  Male/Female:

First Language:  Phone:

Current School:  Email:

Catholic?  Have you received:  Baptism?  First Eucharist?  Confirmation?

Please fill in all blank boxes. If you have additional children, please use a second form.

**See Reverse for Adults in Same Household**