

# Our Lady of Mt. Carmel Catholic Church Registration

Family Name: \_\_\_\_\_ Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Fax(?): \_\_\_\_\_ Email(?): \_\_\_\_\_ Work Ph: (place, #) \_\_\_\_\_

Single \_\_\_\_\_ Married by a Catholic Priest \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Marriage Annulled \_\_\_\_\_ Widowed \_\_\_\_\_

Please check if you want envelopes \_\_\_\_\_

Date of Registration: \_\_\_\_\_ FOR OFFICE USE: Envelope # \_\_\_\_\_ Special: \_\_\_\_\_

Each Member of the Household First name & initial (Any children over 18 must register separately)	Date of Birth M/D/Y	Family Relationship i.e. husband	Sacraments received? B=Baptism, R= Confession, E= First Communion C= Confirmation. (NC= Non-Catholic)	Occupation or School
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____
9. _____	_____	_____	_____	_____
10. _____	_____	_____	_____	_____