

GOOD SHEPHERD PARISH ~ CONFIDENTIAL FAMILY REGISTRATION FORM

LAST NAME: _____ Head of Household _____

Address _____ Spouse/Significant Other _____

City/Zip _____ Marital Status: (circle one) Single, Married by Priest or Deacon

Phone: Home _____ Cell _____ Married out side of the church, Widowed, Divorced, Separated

Address _____ Mass Attendance: (circle one) Frequent, Regular, Occasional, Seldom

City & Zip _____ Phone _____ Cell _____

	HEAD	SPOUSE/ OTHER	CHILD/ OTHER	CHILD/OTHER	CHILD/OTHER	CHILD/OTHER	CHILD/OTHER
First Name							
Last Name							
Sex (m/f)							
Marital Status							
Religion							
Language							
Occupation							
School/Grade							
Birthdate							
Baptism (y/n)							
1st Holy Communion (y/n)							
Confirmation (y/n)							

