

# ST. ROSE PHILIPPINE DUCHESNE PARISH FAMILY REGISTRATION FORM

rev. June 2023

Date Registered: \_\_\_\_\_

FAMILY LAST NAME: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Head of House: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Mr./Mrs/Miss/Ms/Dr.

Marital Status: \_\_\_\_\_ Date of Marriage: \_\_\_\_\_  
Single/Married/Divorced/Widowed

Occupation: \_\_\_\_\_ Email Address: \_\_\_\_\_

Other Phones: Cell: (\_\_\_\_) \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_\_

Baptized? Y / N First Eucharist? Y / N Confirmed? Y / N Married in the Catholic Church? Y/N

Spouse/Other Adult : \_\_\_\_\_ Birthdate: \_\_\_\_\_

Mr./Mrs/Miss/Ms/Dr.

Occupation: \_\_\_\_\_ Email Address: \_\_\_\_\_

Other Phone: Cell: (\_\_\_\_) \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_\_

Baptized? Y / N First Eucharist? Y / N Confirmed? Y / N

I am requesting Giving Envelopes Y / N **OR** I will sign up for online giving \_\_\_\_ Do you need assistance setting it up? Y / N

## Children (living at home):

Child's Name: \_\_\_\_\_ Last Name \_\_\_\_\_ M / F Birthdate: \_\_\_\_\_

Baptized? \_\_\_\_ yes \_\_\_\_ no First Reconciliation? \_\_\_\_ yes \_\_\_\_ no First Eucharist? \_\_\_\_ yes \_\_\_\_ no Confirmed? \_\_\_\_ yes \_\_\_\_ no

Child's Name: \_\_\_\_\_ Last Name \_\_\_\_\_ M / F Birthdate: \_\_\_\_\_

Baptized? \_\_\_\_ yes \_\_\_\_ no First Reconciliation? \_\_\_\_ yes \_\_\_\_ no First Eucharist? \_\_\_\_ yes \_\_\_\_ no Confirmed? \_\_\_\_ yes \_\_\_\_ no

Child's Name: \_\_\_\_\_ Last Name \_\_\_\_\_ M / F Birthdate: \_\_\_\_\_

Baptized? \_\_\_\_ yes \_\_\_\_ no First Reconciliation? \_\_\_\_ yes \_\_\_\_ no First Eucharist? \_\_\_\_ yes \_\_\_\_ no Confirmed? \_\_\_\_ yes \_\_\_\_ no

Child's Name: \_\_\_\_\_ Last Name \_\_\_\_\_ M / F Birthdate: \_\_\_\_\_

Baptized? \_\_\_\_ yes \_\_\_\_ no First Reconciliation? \_\_\_\_ yes \_\_\_\_ no First Eucharist? \_\_\_\_ yes \_\_\_\_ no Confirmed? \_\_\_\_ yes \_\_\_\_ no

Child's Name: \_\_\_\_\_ Last Name \_\_\_\_\_ M / F Birthdate: \_\_\_\_\_

Baptized? \_\_\_\_ yes \_\_\_\_ no First Reconciliation? \_\_\_\_ yes \_\_\_\_ no First Eucharist? \_\_\_\_ yes \_\_\_\_ no Confirmed? \_\_\_\_ yes \_\_\_\_ no

Additional important information or comments: