

# Our Lady of the Falls Parishioner Registration Form



Parish St. Bridget \_\_\_\_\_ Holy Ghost \_\_\_\_\_ Notre Dame \_\_\_\_\_

Head of Household  
(last name, first name): \_\_\_\_\_

Title (Circle if used): Mr. and Mrs. Mr. Mrs. Miss Ms. Dr. Other: \_\_\_\_\_

Suffix (Circle if used): Jr. Sr. II III IV Other: \_\_\_\_\_

First Name – Spouse: \_\_\_\_\_

If either spouse is NOT Catholic, please indicate how you would like parish mailings addressed: Both spouses listed: Yes/No Catholic Spouse listed only: Yes/No:

### Primary Residence – Address Information

Street Address: \_\_\_\_\_ Mailing Address (if different): \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
 Mobile/Primary Phone: \_\_\_\_\_ Emergency Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

### Secondary Residence – Address Information

Street Address: \_\_\_\_\_ Dates at second residence: From \_\_\_\_\_ Month \_\_\_\_\_ Day to \_\_\_\_\_ Month \_\_\_\_\_ Day  
 City, State, Zip: \_\_\_\_\_ Send mail to second residence during that time: \_\_\_\_\_ Yes \_\_\_\_\_ No  
 Mobile/Primary Phone: \_\_\_\_\_

### Head of Household Member Information

Member Nickname: \_\_\_\_\_ Maiden Name: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
 Gender: \_\_\_\_\_ Religion: \_\_\_\_\_

*If you don't know the month/day/year, please approximate the year. If the date is unknown, at least indicate with a "yes" if the sacrament was received. The name of the church is very helpful if known.*

Baptism:	Yes/No	Date:	Church Name:	City, State:
1 <sup>st</sup> Communion:	Yes/No	Date:	Church Name:	City, State:
1 <sup>st</sup> Reconciliation:	Yes/No	Date:	Church Name:	City, State:
Confirmation:	Yes/No	Date:	Church Name:	City, State:
Marriage:	Yes/No	Date:	Church Name:	City, State:

*For Office Use Only:*  
 Date Registered: \_\_\_\_\_  
 Registration Information Entered: \_\_\_\_\_  
 Registration Packet Provided: \_\_\_\_\_

## Spouse Member Information

Spouse (*last name, first name*): \_\_\_\_\_

Title (*Circle if used*):      Mr. and Mrs.    Mr.    Mrs.    Miss    Ms.    Dr.    Other: \_\_\_\_\_

Suffix (*Circle if used*):      Jr.    Sr.    II    III    IV    Other: \_\_\_\_\_

Member Nickname: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Gender: \_\_\_\_\_ Religion: \_\_\_\_\_

Email address: \_\_\_\_\_

*If you don't know the month/day/year, please approximate the year. If the date is unknown, at least indicate with a "yes" if the sacrament was received. The name of the church is very helpful if known.*

Baptism:      Yes/No    Date: \_\_\_\_\_    Church Name: \_\_\_\_\_    City, State: \_\_\_\_\_

1<sup>st</sup> Communion:      Yes/No    Date: \_\_\_\_\_    Church Name: \_\_\_\_\_    City, State: \_\_\_\_\_

1<sup>st</sup> Reconciliation:      Yes/No    Date: \_\_\_\_\_    Church Name: \_\_\_\_\_    City, State: \_\_\_\_\_

Confirmation:      Yes/No    Date: \_\_\_\_\_    Church Name: \_\_\_\_\_    City, State: \_\_\_\_\_

Marriage:      Yes/No    Date: \_\_\_\_\_    Church Name: \_\_\_\_\_    City, State: \_\_\_\_\_

## Child (under 18) Member Information

Name (*last name, first name*): \_\_\_\_\_

Member Nickname: \_\_\_\_\_ Religion: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Gender: \_\_\_\_\_ School: \_\_\_\_\_

*If you don't know the month/day/year, please approximate the year. If the date is unknown, at least indicate with a "yes" if the sacrament was received. The name of the church is very helpful if known.*

Baptism:      Yes/No    Date: \_\_\_\_\_    Church Name: \_\_\_\_\_    City, State: \_\_\_\_\_

1<sup>st</sup> Communion:      Yes/No    Date: \_\_\_\_\_    Church Name: \_\_\_\_\_    City, State: \_\_\_\_\_

1<sup>st</sup> Reconciliation:      Yes/No    Date: \_\_\_\_\_    Church Name: \_\_\_\_\_    City, State: \_\_\_\_\_

Confirmation:      Yes/No    Date: \_\_\_\_\_    Church Name: \_\_\_\_\_    City, State: \_\_\_\_\_

Marriage:      Yes/No    Date: \_\_\_\_\_    Church Name: \_\_\_\_\_    City, State: \_\_\_\_\_

## Child (under 18) Member Information

Name (last name, first name): \_\_\_\_\_

Member Nickname: \_\_\_\_\_ Religion: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Gender: \_\_\_\_\_ School: \_\_\_\_\_

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1<sup>st</sup> Reconciliation: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_

Confirmation: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_

Marriage: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_

## Child (under 18) Member Information

Name (last name, first name): \_\_\_\_\_

Member Nickname: \_\_\_\_\_ Religion: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Gender: \_\_\_\_\_ School: \_\_\_\_\_

*If you don't know the month/day/year, please approximate the year. If the date is unknown, at least indicate with a "yes" if the sacrament was received. The name of the church is very helpful if known.*

Baptism: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_

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Marriage: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_

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Marriage: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_

## Child (under 18) Member Information

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Member Nickname: \_\_\_\_\_ Religion: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Gender: \_\_\_\_\_ School: \_\_\_\_\_

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1<sup>st</sup> Reconciliation: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_

Confirmation: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_

Marriage: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_

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Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

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Confirmation: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_

Marriage: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_

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Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

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Marriage: Yes/No Date: \_\_\_\_\_ Church Name: \_\_\_\_\_ City, State: \_\_\_\_\_