

Church of the Good Shepherd Registration Form

Family Last Name: _____ Home Phone: _____

Home Address: _____ City/State/Zip: _____

Husband's Work Phone: _____ Email Address: _____

Wife's Work Phone: _____ Email Address: _____

Date Married _____ Location of Marriage _____ Wife's Maiden Name _____

Information Head (s) of Household

First Name _____ Date of Birth _____ Religion _____

Marital Status: Married in the Catholic Church Sacraments: Baptized Yes No
 Married Elsewhere (e.g. civil ceremony) First Communion Yes No
 Single Widowed Confirmation Yes No
 Separated Divorced
 Living Together If you were not married in the Catholic Church,
are you intered in having your marriage blessed? Yes No

Occupation _____ Special Skills/Hobbies _____

Ministry Groups Involved in _____ Ministry Groups Interested in _____

First Name _____ Date of Birth _____ Religion _____

Sacraments: Baptized Yes No
First Communion Yes No
Confirmation Yes No

Occupation _____ Special Skills/Hobbies _____

Ministry Groups Involved in _____ Ministry Groups Interested in _____

Other Adults in your home and relation to the Head (s) of household: _____

If a language in addition to or other than english is spoken in the home, please indicate what language: _____

Yes I would like Sunday Contribution Envelopes

Children in Household

First Name _____ **Last Name** _____ **Date of Birth** _____
(If different than family name)
Male Female Relationship to Head (s) of household _____
Son, daughter, grandchild, niece, nephew, etc
Sacraments: Baptized Yes No Registered in Religious Ed Yes No
First Communion Yes No
Confirmation Yes No If yes, which grade?
School Attending _____ Grade _____
Special Skills/Hobbies _____

First Name _____ **Last Name** _____ **Date of Birth** _____
(If different than family name)
Male Female Relationship to Head (s) of household _____
Son, daughter, grandchild, niece, nephew, etc
Sacraments: Baptized Yes No Registered in Religious Ed Yes No
First Communion Yes No
Confirmation Yes No If yes, which grade?
School Attending _____ Grade _____
Special Skills/Hobbies _____

First Name _____ **Last Name** _____ **Date of Birth** _____
(If different than family name)
Male Female Relationship to Head (s) of household _____
Son, daughter, grandchild, niece, nephew, etc
Sacraments: Baptized Yes No Registered in Religious Ed Yes No
First Communion Yes No
Confirmation Yes No If yes, which grade?
School Attending _____ Grade _____
Special Skills/Hobbies _____

First Name _____ **Last Name** _____ **Date of Birth** _____
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Male Female Relationship to Head (s) of household _____
Son, daughter, grandchild, niece, nephew, etc
Sacraments: Baptized Yes No Registered in Religious Ed Yes No
First Communion Yes No
Confirmation Yes No If yes, which grade?
School Attending _____ Grade _____
Special Skills/Hobbies _____