

**IMMACULATE HEART OF MARY CATHOLIC CHURCH**

**REGISTRATION FORM**

Welcome to our Parish!

**For Office Use Only**

ID Number:	Reason:
Inactive Date:	

Date \_\_\_\_\_

**Confidential - For Church Use Only - Please Type or Print Clearly and Completely**

Family Last Name \_\_\_\_\_  Mr./Mrs.  Mr.  Mrs.  Ms.  Miss  Dr./Mrs.  
 Single  Married  Separated  Divorced  Widowed

Street Mailing Address \_\_\_\_\_ City \_\_\_\_\_ NC Zip Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_  Unlisted? Main Language Spoken at Home \_\_\_\_\_

E-mail Address \_\_\_\_\_

Send me an Electronic Funds Transfer Form

**Member Information**

*(Please list all member information for everyone residing in the household)*

	Husband or Single Male	Wife or Single Female	Child	Child	Child	Child	Child	Child	Other
First Name									
Last Name if different									
Religion									
Occupation									
Work Phone #									
Cell Phone #									
Sex	Male	Female	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F
Birth Date									

**Sacraments Received**

*(Please provide a Baptismal certificate for any child who has not received the Sacrament of Confirmation)*

Baptism	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
1st Communion	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
Confirmation	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
Marriage	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N								<input type="checkbox"/> Y <input type="checkbox"/> N

**Ministries/Talents Information**

Do you have any special ministries or talents you would like to offer to any of our commissions, committees or programs? \_\_\_\_\_

I would like to volunteer for: \_\_\_\_\_

Do you have any questions or concerns that need to be addressed by a staff member or a priest? \_\_\_\_\_

**\* \* FORMULARIO EN ESPAÑOL AL REVERSO \* \***