



Holy Family Parishes

HOLY TRINITY • ST. ANN • ST. LOUIS • ST. PHILOMENA

*A Catholic Community of Like-minded Believers,
Striving to be One Parish, Under the Cross of Christ*

For Office Use:

Date of Registration: _____

HOLY FAMILY PARISH REGISTRATION FORM

Preferred Mass Time:

3:30 PM _____ 5:30 PM _____ 8:00 AM _____ 10:00 AM _____ 11:30 AM _____

FAMILY NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME TELEPHONE _____ CELL _____

EMAIL ADDRESS _____

MARITAL STATUS: MARRIED _____ SINGLE _____ WIDOWED _____ DIVORCED _____

DATE & CHURCH WHERE MARRIAGE RECORDED _____

IF NOT MARRIED IN THE CHURCH, WOULD YOU LIKE TO BE? _____

Are there any concerns or information that you would want the Pastor aware of?

Are there any specific ways in which we can be of service or assistance to you?

HEAD OF HOUSEHOLD – Name and Occupation

SPOUSE – Name and Occupation (please include maiden name)

Please list names, birthdates and appropriate religious information for family members:

Name	Birthdate	Religion	Church of Baptism	Church of Confirmation
------	-----------	----------	-------------------	------------------------

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Talents and/or Passion you wish to share with the Parish Family:

1. _____
2. _____
3. _____

*Online Giving: Yes _____ No _____