

# St. Catherine of Siena Parish ~Registration Form

Corpus Christi site or  Our Lady of Lourdes site

**PLEASE PRINT**

**DATE:** \_\_\_\_\_

## **ADULTS**

1. Mr./Mrs./Ms/Dr. Last Name \_\_\_\_\_  
First Name \_\_\_\_\_  
Birth Date (y/m/d) \_\_\_/\_\_\_/\_\_\_ Religion \_\_\_\_\_  
Occupation/Location \_\_\_\_\_

Address \_\_\_\_\_ City/Town \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone Numbers: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

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

*MARITAL STATUS (Please check:)*

Single  Widowed  Separated  Divorced  
 Married in the Roman Catholic Church (by marriage or convalidation)  
 Married outside the Roman Catholic Church  Living Common Law

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2. Mr./Mrs./Ms/Dr. Last Name \_\_\_\_\_  
First Name \_\_\_\_\_  
Birth Date (y/m/d) \_\_\_/\_\_\_/\_\_\_ Religion \_\_\_\_\_  
Occupation/Location \_\_\_\_\_

Address \_\_\_\_\_ City/Town \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone Numbers: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

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

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## **CHILDREN LIVING IN YOUR HOUSEHOLD**

1. Name [First, Middle & Last] \_\_\_\_\_ Gender  M  F

*Please check:*

Birthdate \_\_\_/\_\_\_/\_\_\_ Baptized \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmed \_\_\_\_\_  
(y/m/d) School \_\_\_\_\_ Grade \_\_\_\_\_

2. Name [First, Middle & Last] \_\_\_\_\_ Gender  M  F

*Please check:*

Birthdate \_\_\_/\_\_\_/\_\_\_ Baptized \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmed \_\_\_\_\_  
(y/m/d) School \_\_\_\_\_ Grade \_\_\_\_\_

3. Name [First, Middle & Last] \_\_\_\_\_ Gender  M  F

*Please check:*  
Birthdate \_\_\_/\_\_\_/\_\_\_ Baptized \_\_\_ First Communion \_\_\_ Confirmed \_\_\_  
(y/m/d) School \_\_\_\_\_ Grade \_\_\_\_\_

**CHILDREN LIVING IN YOUR HOUSEHOLD**

4. Name [First, Middle & Last] \_\_\_\_\_ Gender \_\_\_ M \_\_\_ F

*Please check:*  
Birthdate \_\_\_/\_\_\_/\_\_\_ Baptized \_\_\_ First Communion \_\_\_ Confirmed \_\_\_  
(y/m/d) School \_\_\_\_\_ Grade \_\_\_\_\_

5. Name [First, Middle & Last] \_\_\_\_\_ Gender \_\_\_ M \_\_\_ F

*Please check:*  
Birthdate \_\_\_/\_\_\_/\_\_\_ Baptized \_\_\_ First Communion \_\_\_ Confirmed \_\_\_  
(y/m/d) School \_\_\_\_\_ Grade \_\_\_\_\_

**OTHER ADULTS IN YOUR HOUSEHOLD**

3. Mr./Mrs./Ms/Dr. Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Birth Date (y/m/d) \_\_\_/\_\_\_/\_\_\_ Religion \_\_\_\_\_

Occupation/Location \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Address \_\_\_\_\_ City/Town \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone Numbers: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

*MARITAL STATUS (Please check:)*

\_\_\_ Single \_\_\_ Widowed \_\_\_ Separated \_\_\_ Divorced

\_\_\_ Married in the Roman Catholic Church (by marriage or convalidation)

\_\_\_ Married outside the Roman Catholic Church \_\_\_ Living Common Law

4. Mr./Mrs./Ms/Dr. Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Birth Date (y/m/d) \_\_\_/\_\_\_/\_\_\_ Religion \_\_\_\_\_

Occupation/Location \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Address \_\_\_\_\_ City/Town \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone Numbers: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

*MARITAL STATUS (Please check:)*

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