

# Holy Family Catholic Church

## Family Registration

9974 I Ave, Hesperia, CA 92345 (760) 244-9180

<b>OFFICE ONLY</b>
New _____
Update _____
Info entered by _____
Envelope # Assigned _____

**Last Name:**  **First Name(s):**

**Mailing Name (ie Mr. & Mrs. John Doe)**

**Address:**  **Add2:**

**City:**  **State:**  **Zip:**

**AreaCode:**  **Home Phone:**  **Emerg. Phone:**

**Family Email:**

### Individual Member Information

	1		2
<b>Parish Status:</b> <i>(Active, Inactive)</i>	<input type="text"/>		<input type="text"/>
<b>Role:</b> <i>(Head of House, Husband, Wife, etc.)</i>	<input type="text"/>		<input type="text"/>
<b>First Name / Nickname:</b>	<input type="text"/> / <input type="text"/>		<input type="text"/> / <input type="text"/>
<b>Gender:</b>	<b>Male / Female</b> (Maiden) <input type="text"/>		<b>Male / Female</b> (Maiden) <input type="text"/>
<b>DOB (mm/dd/yyyy):</b>	<input type="text"/> / <input type="text"/> / <input type="text"/>		<input type="text"/> / <input type="text"/> / <input type="text"/>
<b>Email:</b>	<input type="text"/>		<input type="text"/>
<b>Work Phone/Cell Phone:</b>	<input type="text"/> / <input type="text"/>		<input type="text"/> / <input type="text"/>
<b>First Language:</b>	<input type="text"/>		<input type="text"/>
<b>Occupation / Employer:</b>	<input type="text"/> / <input type="text"/>		<input type="text"/> / <input type="text"/>
<b>Sacramental Info:</b>	<b>Baptized?</b> <input type="checkbox"/>	<b>Catholic?</b> <input type="checkbox"/>	<b>Baptized?</b> <input type="checkbox"/>
<b>Dates (mm/dd/yyyy):</b>	<input type="text"/> / <input type="text"/> / <input type="text"/>		<input type="text"/> / <input type="text"/> / <input type="text"/>
	<b>Reconciliation?</b> <input type="checkbox"/>	<b>First Eucharist?</b> <input type="checkbox"/>	<b>Reconciliation?</b> <input type="checkbox"/>
	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
	<b>Confirmed?</b> <input type="checkbox"/>		<b>Confirmed?</b> <input type="checkbox"/>
	<input type="text"/> / <input type="text"/> / <input type="text"/>		<input type="text"/> / <input type="text"/> / <input type="text"/>
<i>(Single, Married, Separated, Divorced, Annulled)</i>	<b>Marriage Status:</b> <input type="text"/>		<b>Valid Catholic Marriage?</b> <input type="checkbox"/>

**\*\*Are there any members of your household who are interested in a ministry? If so, which one? \_\_\_\_\_**

