

**Please See Instructions on back of sheet and print all information**

| Family Name:   |                   |          |                          | Home Phone:   |                            | Unlisted? (Y/N)        |                  |                        | Envelope No.:               |            |
|--|-------------------|----------|--------------------------|---------------|----------------------------|------------------------|------------------|------------------------|-----------------------------|------------|
| Street Address:  |                   |          |                          | Apt No.:      | City:                      |                        |                  | State:                 | Zip:                        |            |
| Members in Household<br>Full Name<br>(include Maiden Name) | Relationship      | Religion | Birth Date<br>MM/DD/YYYY | Current Grade | Baptized At<br>Church/City | First Communion<br>Y/N | Confirmed<br>Y/N | Marital Status<br>Code | Marriage Date<br>MM/DD/YYYY | Cell Phone |
| 1.   | Head of Household |          |                          |               |                            |                        |                  |                        |                             |            |
| 2.   | Spouse            |          |                          |               |                            |                        |                  |                        |                             |            |
| 3.   |                   |          |                          |               |                            |                        |                  |                        |                             |            |
| 4.   |                   |          |                          |               |                            |                        |                  |                        |                             |            |
| 5.   |                   |          |                          |               |                            |                        |                  |                        |                             |            |
| 6.   |                   |          |                          |               |                            |                        |                  |                        |                             |            |

**Additional Information (that may help us serve you better)**

| Email | Occupation | Business Phone | Highest Level of School/<br>College Attended/Military<br>Service | Special Needs<br>(including if Shut-In) | Skills & Hobbies | Parish Ministry/Society Involvement |
|-------|------------|----------------|--|---|------------------|-------------------------------------|
| 1.    |            |                |  |   |                  |                                     |
| 2.    |            |                |  |   |                  |                                     |
| 3.    |            |                |  |   |                  |                                     |
| 4.    |            |                |  |   |                  |                                     |
| 5.    |            |                |  |   |                  |                                     |
| 6.    |            |                |  |   |                  |                                     |

Please use additional sheets if necessary

**Header Information**

- Family Name – fill in the family surname or last name
- Home Phone – fill in the home telephone or main contact number
- Unlisted – indicate if the telephone number is unlisted
- Envelope Number – if known, please indicate the envelope number
- Street Address – fill in the street name and number
- Apt No. – fill in the apartment number if applicable
- City – fill in the name of the city
- State – fill in the state name
- Zip – fill in the zip code

**Member Information First Section ( please fill out the line item information for each family member)**

- Member Full Name – fill in the first, middle initial, and last name (also indicate the maiden name if applicable)
- Relationship in Family – fill in the relationship to the Head of Household; e.g. Head of Household, Spouse, Son, Daughter, Mother, Father
- Religion – fill in the religion for this member; Catholic, Baptist, Methodist, etc.
- Birth Date – fill in the date of birth of this individual in the MM/DD/YYYY format
- Current Grade – for children in school, please indicate their current grade in school
- Baptized – if baptized please indicate Y/N
- Baptized At Church/City – fill in the Church Baptized and City
- First Communion – if First Communion received indicate Y/N
- Confirmation – if Confirmation received indicate Y/N
- Marital Status Code – MC (married Catholic Church), MO (married other Church), MV (married civil only), S (single), W (widowed), D (divorced)
- Marriage Date – if married, please fill in the date in the MM/DD/YYYY format
- Cell Phone Number – please fill in the cell phone number if possible

**Member Information Second Section (for each member in section 1 lines 1 to 6 please fill in the corresponding information)**

- Email Address - please fill in the email address if possible
- Occupation – if applicable please fill in the occupation or retired
- Business Phone - please fill in the business phone number if possible
- Highest Level of School/College Attended/Military Service – indicate the highest grade completed, 6<sup>th</sup>, 12<sup>th</sup>, College, Masters, and/or military service
- Special Needs – indicate any special needs for this individual, e.g., Shut-In, etc.
- Skills & Hobbies – indicate and information you fill applicable
- Parish Ministry/Society Involvement – indicate all ministries and societies that this member is part of, e.g., Lector, EM, Altar Server, Usher, Cantor, Choir, Children’s Choir, Youth Group, Social Concerns, Stephen Ministry, Liturgy, Arts & Environment, Altar & Rosary, and/or Holy Name