

Adult 1

First & Last Name _____

Street Address _____

City _____ State _____ Zip _____

Home # _____ Unlisted?

Work # _____ Cell # _____

E-Mail _____

Occupation _____

Adult 2

First & Last Name _____

Street Address (If Different) _____

City _____ State _____ Zip _____

Home # _____ Unlisted?

Work # _____ Cell # _____

E-Mail _____

Occupation _____

Please list all family members (including Adult 1 and 2). Please check box if sacrament has been received. Add date and church if known.

Last Name, First Name	DOB (MM/DD/YY)	Baptized (Date & Church)	Reconciliation (date & church)	1 st Comm. (date & church)	Confirmation (date & church)	Marriage (date & church)
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are you interested in volunteering? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> maybe	Liturgical involvement interests.	Are you interested in being contacted regarding the following?
Please list any talents or skills you can offer	<input type="checkbox"/> Lector <input type="checkbox"/> Catechist <input type="checkbox"/> Hospitality <input type="checkbox"/> Children's Liturgy <input type="checkbox"/> Musician <input type="checkbox"/> Decorating <input type="checkbox"/> Euch. Minister <input type="checkbox"/> Altar Server	<input type="checkbox"/> Baptism Preparation <input type="checkbox"/> Marriage Prep. <input type="checkbox"/> Adult Confirmation <input type="checkbox"/> RCIA (Becoming Catholic) <input type="checkbox"/> Annulment <input type="checkbox"/> Marriage Blessing <input type="checkbox"/> Other (please Specify) _____