



# Our Lady of Mount Carmel Parish Registration Form

**Select your choice:** Tithes Envelopes or Sure Pay      **Registration Date:** \_\_\_\_\_

**Family Name (Last)** \_\_\_\_\_

### Head of Household Information

First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Prefers to be addressed by : \_\_\_\_\_  
(Please circle)

M / F      Religion: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Home Phone:** (\_\_\_\_\_) \_\_\_\_\_ **Cell Phone:** (\_\_\_\_\_) \_\_\_\_\_

Home Address: \_\_\_\_\_  
Apt. #,      City,      State,      Zip

### Mailing Address if different from above

Address: \_\_\_\_\_  
Apt. #,      City,      State,      Zip

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

**Employer:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_

**Marital Status:** (circle one)      Married/Single/Divorced/Widowed

### Please check Sacraments completed:

Baptism: \_\_\_\_\_ Holy Eucharist: \_\_\_\_\_ Confirmation: \_\_\_\_\_ Marriage: \_\_\_\_\_

\*\*\*\*\*  
**Spouse/Other information:** Does spouse also wish to register? \_\_\_\_\_

\_\_\_\_\_  
Last                                      First                                      M.I.                                      Prefers to be called

**Religion:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_

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

### Please check Sacraments completed:

Baptism: \_\_\_\_\_ Holy Eucharist: \_\_\_\_\_  
Confirmation: \_\_\_\_\_  
Marriage: \_\_\_\_\_

For Additional Family Information Please Complete page 2

**1. Child's Name:** \_\_\_\_\_  
Last Name First Middle  
**(Please circle)**  
Male or Female **Date of Birth:** \_\_\_\_\_  
**Sacraments Received:** Baptism \_\_\_\_\_ Holy Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_

**2. Child's Name:** \_\_\_\_\_  
Last Name First Middle  
**(Please circle)**  
Male or Female **Date of Birth:** \_\_\_\_\_  
**Sacraments Received:** Baptism \_\_\_\_\_ Holy Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_

**3. Child's Name:** \_\_\_\_\_  
Last Name First Middle  
**(Please circle)**  
Male or Female **Date of Birth:** \_\_\_\_\_  
**Sacraments Received:** Baptism \_\_\_\_\_ Holy Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_

**4. Child's Name:** \_\_\_\_\_  
Last Name First Middle  
**(Please circle)**  
Male or Female **Date of Birth:** \_\_\_\_\_  
**Sacraments Received:** Baptism \_\_\_\_\_ Holy Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_

**5. Child's Name:** \_\_\_\_\_  
Last Name First Middle  
**(Please circle)**  
Male or Female **Date of Birth:** \_\_\_\_\_  
**Sacraments Received:** Baptism \_\_\_\_\_ Holy Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_

**6. Child's Name:** \_\_\_\_\_  
Last Name First Middle  
**(Please circle)**  
Male or Female **Date of Birth:** \_\_\_\_\_  
**Sacraments Received:** Baptism \_\_\_\_\_ Holy Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_

<b>Office Use Only</b>		
Parish Envelope # _____	Rolodex Complete _____	Catholic Sun _____
Church Budget _____	L.R. _____	Completed By _____