

## Corpus Christi Registration Form

Date \_\_\_\_\_

Household name(s): \_\_\_\_\_ Number of people in household: \_\_\_\_\_

Informal (First) Name(s): \_\_\_\_\_

Preferred Mailing Name: \_\_\_\_\_

Home address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Home phone number \_\_\_\_\_ Phone 2 (indicate work or cell phone) \_\_\_\_\_

E-mail address \_\_\_\_\_

Additional household member's email address \_\_\_\_\_

Household Status: Single (including widowed or divorced) Married Partnered Religious Community  
Other \_\_\_\_\_

**Your financial support of the parish through the use of envelopes or your bank's automatic payment service allows us to provide you with accurate tax statements, as well as facilitating the parish's annual fiscal planning.** Please check  if you wish to receive envelopes or  if you wish more information about automatic payments

Name A \_\_\_\_\_ Goes By \_\_\_\_\_ DOB \_\_\_\_\_ Gender M F  
Religion \_\_\_\_\_ Will be a member? Yes  No  Occupation \_\_\_\_\_

Name B \_\_\_\_\_ Goes By \_\_\_\_\_ DOB \_\_\_\_\_ Gender M F  
Religion \_\_\_\_\_ Relationship to A \_\_\_\_\_ Occupation \_\_\_\_\_

Name C \_\_\_\_\_ Goes By \_\_\_\_\_ DOB \_\_\_\_\_ Gender M F  
Religion \_\_\_\_\_ Relationship to A \_\_\_\_\_ Occupation \_\_\_\_\_

Name D \_\_\_\_\_ Goes By \_\_\_\_\_ DOB \_\_\_\_\_ Gender M F  
Religion \_\_\_\_\_ Relationship to A \_\_\_\_\_ Occupation \_\_\_\_\_

Name E \_\_\_\_\_ Goes By \_\_\_\_\_ DOB \_\_\_\_\_ Gender M F  
Religion \_\_\_\_\_ Relationship to A \_\_\_\_\_ Occupation \_\_\_\_\_

Name F \_\_\_\_\_ Goes By \_\_\_\_\_ DOB \_\_\_\_\_ Gender M F  
Religion \_\_\_\_\_ Relationship to A \_\_\_\_\_ Occupation \_\_\_\_\_

**Sacraments received** (Please include the year if known, otherwise just check):

| Names (from above) | Baptism | First Holy Communion | Confirmation | Reconciliation (Confession) | Marriage | Sacrament of Sick | Holy Orders |
|--------------------|---------|----------------------|--------------|-----------------------------|----------|-------------------|-------------|
| A                  |         |                      |              |                             |          |                   |             |
| B                  |         |                      |              |                             |          |                   |             |
| C                  |         |                      |              |                             |          |                   |             |
| D                  |         |                      |              |                             |          |                   |             |
| E                  |         |                      |              |                             |          |                   |             |
| F                  |         |                      |              |                             |          |                   |             |

