FAMILY LAST NAME: _____ FIRST: _____ SPOUSE: _____

TITLE: MR./MRS.   MR.   MRS.   MS.   MISS   DR./MRS.   PO BOX: _____ STREET ADDRESS: _____

CITY: _____ ZIP: _____ PHONE:( ) _____ Cell or Home

EMAIL: _____ PHONE:( ) _____ Cell or Home

E-Giving   Y / N

DATE REGISTERED: _____ MARITAL STATUS: CHURCH MAR   CIVIL MAR   SINGLE   DIV   SEP   WID

OF CHILDREN AT HOME: _____ COMMENTS: _____

Our Lady of
Pompeii Parish

INSTRUCTIONS: *Please fill out to the best of your ability.*
1. Circle the title: M/M, Mr., etc.
2. Marital Status means the following: CHURCH Mar - Married by a Roman Catholic Priest   CIVIL MAR - Married by minister, courts, etc.
3. DIV - divorced   SEP - separated   WID - widow/er
4. On the back enter in all sacramental info with the church and full date of each sacrament made. Only fill in spaces if the sacrament has already been made. Circle the following: Y - If date is unknown, but sacrament was received   H – Here, if sacrament was received at our church

MEMBER INFORMATION

	HEAD	SPOUSE	CHILD	CHILD	CHILD	CHILD	CHILD
FIRST NAME							
MAIDEN NAME or DIFFERENT LAST NAME							
MARITAL STATUS							
RELIGION							
OCCUPATION							
GRADE /or Highest Degree							
SCHOOL							
BIRTHDAY							
SEX	M / F	M / F	M / F	M / F	M / F	M / F	M / F

		HEAD	SPOUSE	CHILD	CHILD	CHILD	CHILD
BAPTISM	date						
	church	Y H	Y H	Y H	Y H	Y H	Y H
PENANCE	date						
	church	Y H	Y H	Y H	Y H	Y H	Y H
1st COMMUNION	date						
	church	Y H	Y H	Y H	Y H	Y H	Y H
CONFIRMATION	date						
	church	Y H	Y H	Y H	Y H	Y H	Y H
MARRIAGE	date						
	church	Y H	Y H	Y H	Y H	Y H	Y H

MINISTRIES: _____

TALENTS: _____

I WOULD LIKE TO VOLUNTEER FOR: _____

COMMENTS: _____