

St. Elizabeth Ann Seton Family Registration Form

Today's Date: _____

Please include all family members living in your household. For households with multiple families, please complete a separate registration for each family. Adult children over 21 may also register individually. Please include as much information as possible.

FAMILY INFORMATION

Family Name: _____ (As you would like it to appear in mailings)

Head Last Name: _____ **First:** _____ **Title:** _____

Spouse Last : _____ **First:** _____ **Title:** _____

Street Address: _____ **City/State:** _____

_____ **Zip:** _____

Primary Phone: _____ **Description** _____ (cell,home,work,other)

Other Phone: _____ **Description** _____ (cell,home,work,other)

Family Email: _____

Mailing Address: _____ **City/State:** _____

(if different) _____ **Zip:** _____

When did you begin attending St. Elizabeth Ann Seton? _____ (Month and year, if known)

Preferred Mass Time(s): 5:00 Sat 7:00 8:15 10:00 11:45 1:15 5:00 6:30 None

Giving Preference: Online Envelopes Mail/Bank Billpay Loose Cash Other

INDIVIDUAL FAMILY MEMBER INFORMATION - #1

Last Name: _____ **First Name:** _____ **Middle:** _____

Preferred Name: _____ **Title:** _____ **Suffix:** _____ **Maiden Name:** _____

Personal Information:

Relationship (Father, Mother, Son, etc): _____ **Marital Status:** _____

Grade/Degree: _____ **Gender:** _____ **Birthdate:** _____

Language: _____ **Ethnicity:** _____ **Occupation:** _____

Religion: _____ **Special Need:** _____ **Employer:** _____

Phone: _____ **Description:** _____ (cell,home,work,other)

Email: _____

Birthplace: _____

Baptism: _____ **If Yes, Date:** _____

Father's name: _____ **Mother's (Maiden) Name:** _____

Church Name & Location: _____

1st Communion: _____ **Date:** _____

Confirmation: _____ **Date:** _____

Marriage: _____ **Date:** _____ **Church Name & Location:** _____

Marriage Type: _____ (Catholic / Other Church / Civil / Common Law / Other)

I would like to volunteer the following skills: _____

I would like to volunteer for the following ministries: _____

INDIVIDUAL FAMILY MEMBER INFORMATION - #2

Last Name: _____ **First Name:** _____ **Middle:** _____

Preferred Name: _____ **Title:** _____ **Suffix:** _____ **Maiden Name:** _____

Personal Information:

Relationship (Father, Mother, Son, etc): _____ **Marital Status:** _____

Grade/Degree: _____ **Gender:** _____ **Birthdate:** _____

Language: _____ **Ethnicity:** _____ **Occupation:** _____

Individual Family Member #2 (cont'd)

Religion: _____ Special Need: _____ Employer: _____
 Phone: _____ Description: _____ (cell,home,work,other)
 Email: _____
 Birthplace: _____
 Baptism: _____ If Yes, Date: _____
 Father's name: _____ Mother's (Maiden) Name: _____
 Church Name & Location: _____
 1st Communion: _____ Date: _____
 Confirmation: _____ Date: _____
 Marriage: _____ Date: _____ Church Name & Location: _____
 Marriage Type: _____ (Catholic / Other Church / Civil / Common Law / Other)

I would like to volunteer the following skills: _____

I would like to volunteer for the following ministries: _____

INDIVIDUAL FAMILY MEMBER INFORMATION - #3

Last Name: _____ First Name: _____ Middle: _____
 Preferred Name: _____ Title: _____ Suffix: _____ Maiden Name: _____
 Personal Information:
 Relationship (Father, Mother, Son, etc): _____ Marital Status: _____
 Grade/Degree: _____ Gender: _____ Birthdate: _____
 Language: _____ Ethnicity: _____ Occupation: _____
 Religion: _____ Special Need: _____ Employer: _____
 Phone: _____ Description: _____ (cell,home,work,other)
 Email: _____
 Birthplace: _____
 Baptism: _____ If Yes, Date: _____
 Father's name: _____ Mother's (Maiden) Name: _____
 Church Name & Location: _____
 1st Communion: _____ Date: _____
 Confirmation: _____ Date: _____
 Marriage: _____ Date: _____ Church Name & Location: _____
 Marriage Type: _____ (Catholic / Other Church / Civil / Common Law / Other)

I would like to volunteer the following skills: _____

I would like to volunteer for the following ministries: _____

Please use multiple forms for additional members.

Notes: _____

For parish office use:

Date Received: _____ Family ID #: _____ New Family: Y N
 Entered by: _____ Envelopes: _____ Registration Date: _____