

Our Lady of the Rosary

Hannibal, New York ~ Parish Registration Form

Today's Date: ___/___/___ Would you like to receive Contribution Envelopes? Yes / No

OFFICE USE ONLY

FAMILY NAME:

Date Entered: ___/___/___

PDS#

Head of Household

Last Name: _____ First: _____ Middle Initial: _____

Title (Circle One): Mr. Mrs. Ms. Miss Dr. Suffix: Sr. Jr. III

Maiden Name (if Female): _____ Language Spoken at Home: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Mailing Address (if Different) : _____

Email Address: _____

Religion: _____ Date of Birth: ___/___/___ Place: _____

Marital Status (Circle One): Single Engaged Married Separated Divorced Widowed

Sacraments Received (Circle all that apply): Baptized 1st Confession 1st Communion Confirmation

Catholic Marriage or Civil Marriage Where: _____ Anniversary: ___/___/___

Spouse / Other Adult

Last Name: _____ First: _____ Middle Initial: _____

Title (Circle One): Mr. Mrs. Ms. Miss Dr. Suffix: Sr. Jr. III

Maiden Name (if Female): _____ Language Spoken at Home: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Mailing Address (if Different) : _____

Email Address: _____

Religion: _____ Date of Birth: ___/___/___ Place: _____

Marital Status (Circle One): Single Engaged Married Separated Divorced Widowed

Sacraments Received (Circle all that apply): Baptized 1st Confession 1st Communion Confirmation

Catholic Marriage or Civil Marriage Where: _____ Anniversary: ___/___/___

Children:

Last Name: _____ First: _____ Middle Initial: _____ Suffix: _____

Relation to Head of Household (Circle One): : Child Stepchild Grandchild Other: _____

Date of Birth: ____/____/____ Place: _____

Sacraments Received: Baptized Catholic or Baptized Other When & Where: _____

1st Confession: When & Where: _____

1st Communion: When & Where: _____

Confirmation: When & Where: _____

Last Name: _____ First: _____ Middle Initial: _____ Suffix: _____

Relation to Head of Household (Circle One): : Child Stepchild Grandchild Other: _____

Date of Birth: ____/____/____ Place: _____

Sacraments Received: Baptized Catholic or Baptized Other When & Where: _____

1st Confession: When & Where: _____

1st Communion: When & Where: _____

Confirmation: When & Where: _____

Last Name: _____ First: _____ Middle Initial: _____ Suffix: _____

Relation to Head of Household (Circle One): : Child Stepchild Grandchild Other: _____

Date of Birth: ____/____/____ Place: _____

Sacraments Received: Baptized Catholic or Baptized Other When & Where: _____

1st Confession: When & Where: _____

1st Communion: When & Where: _____

Confirmation: When & Where: _____

Last Name: _____ First: _____ Middle Initial: _____ Suffix: _____

Relation to Head of Household (Circle One): : Child Stepchild Grandchild Other: _____

Date of Birth: ____/____/____ Place: _____

Sacraments Received: Baptized Catholic or Baptized Other When & Where: _____

1st Confession: When & Where: _____

1st Communion: When & Where: _____

Confirmation: When & Where: _____