

Our Lady of Guadalupe Parish Family Registration

Reg Date: / /

153 E Brighton Ave, El Centro, CA 92243 (760) 352-5535

Last Name: First Name(s):

Mailing Name (ie Mr. & Mrs. John Doe)

Address: Add2:

City: State: Zip: -

Area Code: Home Phone: Emerg. Phone:

Family Email: Env#

Individual Member Information

| | | |
|--|---|---|
| Parish Status: <i>(Active, Inactive)</i> Role: <i>(Head of House, Husband, Wife etc.)</i> First Name / Nickname: Gender: Male / Female (Maiden) DOB (mm/dd/yyyy): Email: Work Phone/Cell Phone: First Language: Occupation/Employer: | <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> Male / Female (Maiden) </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / </div> | <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> Male / Female (Maiden) </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / </div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / </div> |
| Sacramental Info: Dates (mm/dd/yyyy): <i>(Single, Married, Separated, Divorced, Annulled)</i> Marital Status: | Baptized? <input type="checkbox"/> Catholic? <input type="checkbox"/> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> Reconcil? <input type="checkbox"/> First Eucharist? <input type="checkbox"/> Confirmed? <input type="checkbox"/> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> Married by Priest/Deacon? <input type="checkbox"/> | Baptized? <input type="checkbox"/> Catholic? <input type="checkbox"/> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> Reconcil? <input type="checkbox"/> First Eucharist? <input type="checkbox"/> Confirmed? <input type="checkbox"/> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> |

Are there any members of your household who would like to be visited by a priest?

Dependent Children Information

| | Relationship to Head of Household <i>(Son, Daughter, Mother, Father etc.)</i> | First Name / Last Name | Gender | Birthdate & Birthplace | H.S. Grad Yr | School First Language |
|----|--|---|--------|---|---|---|
| 1. | | / | M / F | / / | | |
| | Check if Sacrament Received. Add Date if known. | Baptism <input type="checkbox"/> Catholic? <input type="checkbox"/> Eucharist <input type="checkbox"/> Reconciliation <input type="checkbox"/> Confirmation <input type="checkbox"/> | | <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> | <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> | <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> |
| 2. | | / | M / F | / / | | |
| | Check if Sacrament Received. Add Date if known. | Baptism <input type="checkbox"/> Catholic? <input type="checkbox"/> Eucharist <input type="checkbox"/> Reconciliation <input type="checkbox"/> Confirmation <input type="checkbox"/> | | <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> | <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> | <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> |
| 3. | | / | M / F | / / | | |
| | Check if Sacrament Received. Add Date if known. | Baptism <input type="checkbox"/> Catholic? <input type="checkbox"/> Eucharist <input type="checkbox"/> Reconciliation <input type="checkbox"/> Confirmation <input type="checkbox"/> | | <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> | <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> | <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> / / </div> |