

St. Bridget Family Registration

Family Last Name: _____ **Date:** _____

Address: _____ **Zip** _____

Mailing Address (if different): _____

Home Phone: _____ **Cell Phone:** _____

E-mail address: _____ **Language spoken in home:** _____

Ethnicity: Caucasians _____ Black _____ Spanish _____ Indian _____ Other _____

Husband (First, Middle, Last): _____

Date of Birth: _____ **Catholic:** Yes No

Baptized: Yes No **Church of Baptism** _____

Confirmed Yes No **Attends mass at least once a month** Yes No

Wife (First, Middle, Maiden, Last): _____

Date of Birth: _____ **Catholic:** Yes No

Baptized: Yes No **Church of Baptism** _____

Confirmed Yes No **Attends mass at least once a month** Yes No

Marital Status: Single Married Separated Divorced Widowed

Valid Catholic Marriage Yes No **Where?** _____

Children living at home:

Name (First, Middle, Last) _____ **Sex** M F

Age _____ **Birth date** _____ **Baptized** Yes No **Where:** _____

Eucharist Yes No **Reconciliation** Yes No **Confirmed** Yes No

Name (First, Middle, Last) _____ **Sex** M F

Age _____ **Birth date** _____ **Baptized** Yes No **Where:** _____

Eucharist Yes No **Reconciliation** Yes No **Confirmed** Yes No

Name (First, Middle, Last) _____ **Sex** M F

Age _____ **Birth date** _____ **Baptized** Yes No **Where:** _____

Eucharist Yes No **Reconciliation** Yes No **Confirmed** Yes No

Would you like to receive Church Support Envelopes? Yes No