

Our Lady of the Most Holy Trinity Chapel

PARISHIONER INFORMATION FORM

This information is kept confidential. The pastor uses it to care for you and your family, especially regarding the sacraments if an emergency arises, and to keep accurate parish records.

☐ New registration ☐ Update Date: _____

Adult 1 – Name: _____ Birth date: _____

Adult 2 – Name: _____ Birth date: _____

Previous parish or chapel: _____

Address: _____

City: _____ State: _____ ZIP: _____

Adult 1 – Phone: _____ Email: _____

Adult 2 – Phone: _____ Email: _____

Adult 1 – Religion: _____ Baptized: ☐ Yes ☐ No Confirmed: ☐ Yes ☐ No Practicing / Easter duty: ☐ Yes ☐ No

Adult 2 – Religion: _____ Baptized: ☐ Yes ☐ No Confirmed: ☐ Yes ☐ No Practicing / Easter duty: ☐ Yes ☐ No

Marital status: ☐ Single ☐ Married ☐ Widowed ☐ Separated ☐ Discuss privately

Marriage date: _____ Church / place of marriage: _____

Please fill out the other side if it applies to you.

Children *(children 18 and older should fill out their own form)*:

Name	Birth date	Baptized	First Holy Communion	Confirmed
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐
		☐	☐	☐

Emergency contact: _____ Relationship: _____ Phone: _____

Occupations and other information *(optional)*: _____

_____

_____

_____

Please hand the completed form to the priest. Thank you, and may God bless you.