

PARISHIONER REGISTRATION FORM

Please print legibly to ensure correct data entry.

Our Lady Queen of Heaven Parish
750 10th Avenue South ▪ Wisconsin Rapids, WI 54495
715-423-1251 ▪ www.our-lady.org

FAMILY INFORMATION

Today's Date: _____ Last Name: _____

Transferring from: _____ Parish in _____
NAME OF PARISH CITY, STATE, ZIP

Home Address: _____
STREET, CITY, STATE, ZIP

Best Telephone: _____ H C Family Email: _____

Is anyone in your household homebound? _____

Preferred Method of Parish Contribution? Envelopes ACH [*Parish Use Only*: Envelope Number Assigned: _____]

MARITAL STATUS

Single

Widowed

Married in the Catholic Church → Church and Location: _____ Date: _____

Married outside the Catholic Church → Place and Location: _____ Date: _____

Divorced → Date: _____ Annulment? Yes No Date: _____

Separated Check here if you would like information on an annulment.

HEAD OF HOUSEHOLD INFORMATION

Head's Name: _____
FIRST, MIDDLE, LAST

Nickname: _____

Date of Birth: _____

Religion: _____

Cell Phone: _____

Email: _____

Occupation: _____

Maiden Name: _____ N/A

Sacraments Received:

Catholic Baptism

Date: _____ Church: _____

Non-Catholic Christian Baptism

Date: _____ Church: _____

Catholic Eucharist

Date: _____ Church: _____

Catholic Confirmation

Date: _____ Church: _____

Spouse's Name: _____
FIRST, MIDDLE, LAST

Nickname: _____

Date of Birth: _____

Religion: _____

Cell Phone: _____

Email: _____

Occupation: _____

Maiden Name: _____ N/A

Sacraments Received:

Catholic Baptism

Date: _____ Church: _____

Non-Catholic Christian Baptism

Date: _____ Church: _____

Catholic Eucharist

Date: _____ Church: _____

Catholic Confirmation

Date: _____ Church: _____

DEPENDENT CHILDREN INFORMATION

Only list those under 18 and living in the same household.

→ CHILD 1:

FIRST, MIDDLE, LAST NAME GENDER (M/F) DATE OF BIRTH CITY AND STATE OF BIRTH

Sacraments Received

- | | |
|--|--|
| <input type="checkbox"/> Catholic Baptism
Date: _____ Church: _____ | <input type="checkbox"/> Non-Catholic Christian Baptism
Date: _____ Church: _____ |
| <input type="checkbox"/> Catholic Eucharist
Date: _____ Church: _____ | <input type="checkbox"/> Catholic Confirmation
Date: _____ Church: _____ |

Please indicate if father’s name or mother’s name is different than Head of Household information:

Current School Grade Level: _____ Name of School: _____

→ CHILD 2:

FIRST, MIDDLE, LAST NAME GENDER (M/F) DATE OF BIRTH CITY AND STATE OF BIRTH

Sacraments Received

- | | |
|--|--|
| <input type="checkbox"/> Catholic Baptism
Date: _____ Church: _____ | <input type="checkbox"/> Non-Catholic Christian Baptism
Date: _____ Church: _____ |
| <input type="checkbox"/> Catholic Eucharist
Date: _____ Church: _____ | <input type="checkbox"/> Catholic Confirmation
Date: _____ Church: _____ |

Please indicate if father’s name or mother’s name is different than Head of Household information:

Current School Grade Level: _____ Name of School: _____

→ CHILD 3:

FIRST, MIDDLE, LAST NAME GENDER (M/F) DATE OF BIRTH CITY AND STATE OF BIRTH

Sacraments Received

- | | |
|--|--|
| <input type="checkbox"/> Catholic Baptism
Date: _____ Church: _____ | <input type="checkbox"/> Non-Catholic Christian Baptism
Date: _____ Church: _____ |
| <input type="checkbox"/> Catholic Eucharist
Date: _____ Church: _____ | <input type="checkbox"/> Catholic Confirmation
Date: _____ Church: _____ |

Please indicate if father’s name or mother’s name is different than Head of Household information:

Current School Grade Level: _____ Name of School: _____

If you need to add additional children, please make a copy of this page or attach the required information.