

St. Mary-Hearne PARISH REGISTRATION FORM

Last Name (head of household):

(Apellido)

First and Middle Name (Head of Household):

Nombre

Husband (Marido)

Wife (Esposa)

DOB of husband:

DOB of wife:

Address:

Direccion

Physical Address and Mailing Address

City

Texas

Zip Code

Home Phone #:

Cell Phone #:

Spouse's Cell #:

Email Address:

Would you like to receive envelopes?

Yes

No

Online Giving
(EFT)?

Yes

No

Emergency Contact Person:

Emergency Phone #:

Please turn to the reverse side of this form and enter your children's Information.

Children (First, Middle and Last Name):

Hijos (nombre complete incluyendo el apellido del padre) (DOB es fecha de nacimiento: mes/dia/ano)

Name:

DOB:

Name:

DOB:

Name:

DOB:

Name:

DOB:

Name:

DOB:

Name:

DOB:

Date Entered into PM/ParishSoft: _____ *Env #:* _____ *DUID:* _____