PARISH REGISTRATION FORM

Family Last Name: _____ **Address:**_____

Primary Phone: _____ **Email:** _____

Marital Status (circle one): married / single / divorced / widowed

	Full Name (include wife's maiden)	**Nickname**	**M/F**	**DOB**	**Cell Phone**	**Occupation/School**	**Sacraments Y/N** Bapt.	Comm.	Conf.
Self									
Spouse									
Child (in home)									
Child (in home)									
Child (in home)									
Child (in home)									
Child (in home)									

Interested in Volunteering (circle one) **YES / NO**

If yes, we will follow-up with your family to discuss specific areas you wish to volunteer in now or in the future.

What brought you to Our Lady of Mt. Carmel: _____

Church Baptized:_____City/State:_____