

SS. COSMAS & DAMIAN PARISH REGISTRATION

814-938-6540

sscdofc@comcast.net

Today's Date _____

Please complete all information and return form to:

SS. Cosmas & Damian Church
616 West Mahoning St.
Punxsutawney, PA 15767

HOUSEHOLD INFORMATION

Last Name _____

Address _____
Street

City _____ State _____ Zip _____

Home Phone _____

FORMER PARISH

Church _____

Place _____

MARITAL STATUS (Please Circle)

Married Single Widowed Divorced

Date of Marriage ____/____/____

Church _____ City _____

Marriage in the Catholic Church? Yes / No

HEAD OF HOUSEHOLD

Name _____
First Middle Last

Maiden Name _____

____ Male ____ Female Date of Birth _____

Place of Birth _____
City, State

Cell Phone _____

E-mail Address _____

Occupation _____

Employer _____

SACRAMENTS:

Baptized: Yes / No

Church/City of Baptism: _____

First Communion: Yes / No

Church/City: _____

Confirmed: Yes / No

Church/City: _____

Mass Attendance: ____ Regular ____ Occasional
____ Seldom ____ Never

Religion if not Catholic _____

SPOUSE

Name _____
First Middle Last

Maiden Name _____

____ Male ____ Female Date of Birth _____

Place of Birth _____
City, State

Cell Phone _____

E-mail Address _____

Occupation _____

Employer _____

SACRAMENTS:

Baptized: Yes / No

Church/City of Baptism: _____

First Communion: Yes / No

Church/City: _____

Confirmed: Yes / No

Church/City: _____

Mass Attendance: ____ Regular ____ Occasional
____ Seldom ____ Never

Religion if not Catholic _____

**If you or your children were baptized at a parish other than SS. Cosmas & Damian,
or the former parishes of St. Adrian in Delancey, St. Anthony in Walston, or St. Joseph in Anita,
please submit a copy of your baptismal record(s).**

Children Living at Home:

Name First, Middle, Last (if different)	Gender	Date & Place of Birth	Sacraments Received Please Check	Church/ City Where Sacraments Received	School Attending/ Grade	Attending Religious Education?
			Baptism _____ First Comm _____ Confirmation _____	Bapt _____ Comm _____ Conf _____		Y N
			Baptism _____ First Comm _____ Confirmation _____	Bapt _____ Comm _____ Conf _____		Y N
			Baptism _____ First Comm _____ Confirmation _____	Bapt _____ Comm _____ Conf _____		Y N
			Baptism _____ First Comm _____ Confirmation _____	Bapt _____ Comm _____ Conf _____		Y N
			Baptism _____ First Comm _____ Confirmation _____	Bapt _____ Comm _____ Conf _____		Y N

If your Mass attendance is occasional, seldom or never, please indicate reason:

Remarks: Please include any Special Needs /Disabilities:
