The Parish Family of St. Mary's, Crescent Welcomes You!

Family Name:	Addı	ress:		City:	Zip:	
Home Phone:	Is nu	ımber un	listed? Yes:	No:		
Cell Phone:	Emai	l:			OFFI	CE USE ONLY
May we publish your name in the	oulletin as a new member? Ye		nber? Yes:	No:	Date Registered:	#
Family Members Within Household	Date of Birth	Roman Catholic		x if Sacrament Received Eucharist	Confirmation	Current Occupation
Name		Y/N				
Head of Household Marital Status						
Name		Y/N				
Spouse Maiden Name(if applicable)						
Children living at home						
Name						
A.Y.						
Name						
Name						
		37		N.		
Would you like to receive parish envelopes	?	Y	es	No		
Would you like to enroll in e-giving?		Y	es	No		

Others living in your home?							
Name:	Relation to	o family:	_				
Name:	Relation t	o family:	_				
Accommodations and	Special Co	nsiderations					
Are any members of your household homebound?Is	Yes	No					
Is anyone hearing impaired?	Yes	No					
Is anyone physically handicapped?	Yes	No:					
Does anyone speak any language other than English?	Yes	No:					
If so, what language(s)?:							

Anything else you would like us to know about your family?