

Resurrection Parish

303 E. Main Street, Batavia, New York 14020

Registration Form

Family Name: _____ Phone 1: (____) _____ Phone 2: (____) _____ Date: _____

Address: _____
Street City/Town State Zip

Mailing Address (if different): _____
Street City/Town State Zip

E-Mail Address: _____ Church Attendance: Frequent / Regular / Occasional / Seldom

Marital Status: Church Married / Married / Single / Divorced / Separated / Widow

If Married Date of Marriage and Location: _____

Number of Minor Children in Home: _____ Number of Others in Home: _____

Name and Location of Parish you were previously registered: _____

MEMBER INFORMATION

	Head	Spouse	Child	Child	Child	Child
First Name Middle Name (Last Name if different)						
Sex	M / F	M / F	M / F	M / F	M / F	M / F
Birth Date						
Religion – Catholic or other						
Baptism –						
Date & Location						
1 st Penance –						
Date & Location						

Office Use: Envelope Number: _____ Date Entered _____

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	Head	Spouse	Child	Child	Child	Child
1 st Communion – Date & Location						
Confirmation - Date & Location						
Marriage – Date & Location						
Occupation & Location or School Attending						
Ministries / Talents						
Ministries / Talents						
Would like to Volunteer for:						

Comments: _____
