

Our Lady of the Woods Catholic Church  
Official Registration Form



Date of Registration: \_\_\_\_\_

Household Last Name: \_\_\_\_\_

Parish Envelope #: \_\_\_\_\_

**PLEASE PRINT ALL INFORMATION**

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

**Head of Household**

**Spouse**

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Phone # \_\_\_\_\_ Email: \_\_\_\_\_ Phone # \_\_\_\_\_

Mo/Day/Year of Birth \_\_\_\_\_ Religion (C for Catholic): \_\_\_\_\_ Mo/Day/Year of Birth \_\_\_\_\_ Religion (C for Catholic): \_\_\_\_\_

Sacraments Received: \_\_\_ Baptism \_\_\_ First Communion \_\_\_ Confirmation Sacraments Received: \_\_\_ Baptism \_\_\_ First Communion \_\_\_ Confirmation

Marital Status (Single/Married/Widowed/Divorced): \_\_\_\_\_ Marriage date: \_\_\_\_\_ Married by a Catholic Priest

Married at: \_\_\_\_\_ City/State: \_\_\_\_\_ or Deacon? \_\_\_ Yes \_\_\_ No

Please list all children under the age of **18** living at home:

Name	M / F	Date of Birth (M/D/Y)	Sacraments Received	Church Of Baptism (City, State)
			___ Baptism ___ First Communion ___ Confirmation	
			___ Baptism ___ First Communion ___ Confirmation	
			___ Baptism ___ First Communion ___ Confirmation	
			___ Baptism ___ First Communion ___ Confirmation	

We offer an Automatic Contribution Program which allows your weekly, monthly, or quarterly contributions to be transferred electronically from your checking account, savings account, or credit/debit card to the account of Our Lady of the Woods. Would you like more information on this program? \_\_\_ Yes \_\_\_ No

Do you want to be registered for FlockNote? \_\_\_ Yes \_\_\_ No