

Our Lady of the Greenwood, Queen of the Holy Rosary Catholic Church

Hello! We are happy to have you in our parish family!

Please take a minute to complete this form and return it by mail, email, or in the collection basket DATE _____

LAST NAME: _____ FIRST NAME _____ SPOUSE NAME _____

ADDRESS _____ CITY _____ ZIP _____

PHONE _____ UNLISTED Y or N E-MAIL _____

	MEMBER #1	MEMBER #2	MEMBER #3	MEMBER #4	MEMBER #5
NAME					
RELATIONSHIP					
RELIGION					
GENDER					
DATE OF BIRTH					
MARRIED/DATE					
OCCUPATION					
WORKPLACE					
SCHOOL /GRADE					
WORK #					
BAPTIZED					
1ST COMMUNION					
CONFIRMED					

SPECIAL NEEDS TO DISCUSS:

(ADDITIONAL NAMES ON BACK)

BAPTISMS: _____ CONFIRMATIONS: _____ SMRE REGISTRATIONS: _____ SCHOOL REGISTRATIONS: _____ COMMUNION TO THE SICK: _____ HOME BLESSING: _____