

Sacred Heart Catholic Church: ☐ **New Registration,** or ☐ **Information Update Form**

Family Last Name		Preferred Salutation (eg. Mr. & Mrs.; Ms.; Miss; Dr. & Mrs.; John & Judy; etc.)	
Address		Family Status A. Single (residing alone) G. Divorced (with minor children) B. Single (residing with parents) H. Living with "significant other" C. Married with minor children I. Widow(er) - living alone D. Married without minor children J. Widow(er) (with minor children) E. Single parent with minor children K. Widow(er) (living with adult children) F. Divorced - living alone L. IF OTHER, please identify on reverse...	
Apt. #			
City	Zip	Home Phone (landline or cell)	May we publish your 'home' number in our annual parish directory? <input type="checkbox"/> Yes <input type="checkbox"/> No

Head of Household		Spouse	
Name	Middle Initial	Name	Middle Initial
Date of Birth	Religion (if not Catholic)	Date of Birth	Religion (if not Catholic)
Occupation: (if student, list institution & anticipated graduation date)		Occupation: (if student, list institution & anticipated graduation date)	
Employer	Work Phone (never published)	Employer	Work Phone (never published)
Email	Cell Phone (never published)	Email	Cell Phone (never published)
Sacramental History Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No First Eucharist? <input type="checkbox"/> Yes <input type="checkbox"/> No Confirmed? <input type="checkbox"/> Yes <input type="checkbox"/> No		Sacramental History Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No First Eucharist? <input type="checkbox"/> Yes <input type="checkbox"/> No Confirmed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If married, is this your... <input type="checkbox"/> First Marriage <input type="checkbox"/> Second Marriage	Were you married by a priest? <input type="checkbox"/> Yes <input type="checkbox"/> No	If married, is this your... <input type="checkbox"/> First Marriage <input type="checkbox"/> Second Marriage	Maiden Name
Church or place of Marriage		City & State of Marriage	Wedding date

Minor(s) living at home {adult children who reside with you must register separately}

Child's Name (including last, if different from above)	Date of Birth	Gender	Baptized?	1st Comm?	Confirmed?	Religious Ed?*	Present School
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> PSR <input type="checkbox"/> Xolic <input type="checkbox"/> None	

* Religious Ed. = Please indicate the means by which your child's Religious Education is supplemented by the Church ❖ PSR = Parish School of Religion {aka: CCD} ❖ Xolic = Catholic School

May we identify you, in the bulletin, as a new parishioner? <input type="checkbox"/> Yes <input type="checkbox"/> No	Does anyone living at this address require Sacramental services at home? <input type="checkbox"/> Yes <input type="checkbox"/> No	Office: <input type="text"/>	Env #: <input type="text"/>	Rolodex: <input type="text"/>	EIC: <input type="text"/>
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If you live alone, please list a "next of kin" and their contact number on the reverse side of this form

If you are new to Sacred Heart Catholic Church, please call 440.707.6707 x3 to schedule a "meet-and-greet" appointment with our pastor, Fr. David Trask.

You may place this completed form in the collection basket, or scan a copy of it to → Secretary@SHOJ.cc