

THIS IS A PRIVATE RECORD AND WILL BE KEPT CONFIDENTIAL
Holy Rosary Parish + PO Box 206 + Edmonds, WA 98020-0206
Parish Registration Card

For Office Use Only

Date _____

PLEASE PRINT CLEARLY

Envelope No. _____

Last Name _____ Home Phone (Unlisted)
 (_____)

Address _____ City _____ Zip _____

E-mail address _____ Circle Preference (i.e. Mr. & Mrs. Joe Jones / Joe & Mary Jones)
 Mr. & Mrs. / Mr. / Mrs. / Ms. / Miss / First Name & First Name

Member 1 (Head of Household) Male Female **Member 2** Male Female

First Name _____ MI _____ (Maiden Name) _____ First Name _____ MI _____ (Maiden Name) _____

Date of Birth	Work Phone	Date of Birth	Work Phone
M _____ D _____ Y _____	(_____)	M _____ D _____ Y _____	(_____)
	Cell Phone		Cell Phone
	(_____)		(_____)

Occupation (If retired please print retired and give previous occupation) _____

Employer _____

Baptized: Catholic Other Specify _____

1st Eucharist 1st Reconciliation Confirmed 1st Eucharist 1st Reconciliation Confirmed

Special Needs or Interests (handicapped, homebound) _____

Never Married Married Widowed Separated Divorced Re-Married
 Marriage Date--M _____ D _____ Y _____ Married in Catholic Church--Yes No

Children (Including children under 22, if in school)

Name/School	Sex	Grade	Date of Birth	E-mail Address/Cell Phone	Baptized Catholic	Baptized Other	First Eucharist	First Reconciliation	Confirmed

*Include last name of child and circle it if different than parent's name above.

Special Needs of children (handicapped, homebound)

Other Adults Living in the Home	Relationship