

**Registration Form**

**Holy Family Catholic Church      714 North Adams, Mason City, Iowa 50401      641-423-7301**

Family (Last) Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Listed: \_\_\_\_\_ Not Listed: \_\_\_\_\_

Head of Household Cell phone #: \_\_\_\_\_ Spouse Cell phone #: \_\_\_\_\_

Do you wish to receive tithing envelopes? Yes \_\_\_\_\_ No \_\_\_\_\_

Why did you choose to join Holy Family Church? \_\_\_\_\_

Please answer all questions on both sides of this form. Children 18 and over are considered adults and should complete their own form.

**OFFICE USE ONLY**

Reg # \_\_\_\_\_

Circle \_\_\_\_\_

**HEAD OF HOUSEHOLD:**

Name: \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: Male Female

Ethnic Background: Caucasian African American Hispanic Asian Other: \_\_\_\_\_

What foreign language do you speak? \_\_\_\_\_

Present Marital Status: Single Engaged Married Widowed Divorced Separated

Marriage Date: \_\_\_\_\_

Were you married by a priest? Yes No

Present Religion: \_\_\_\_\_

Are you handicapped or shut-in? \_\_\_\_\_ Explain: \_\_\_\_\_

Occupation: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

**SPOUSE:**

Name: \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: Male Female

Ethnic Background: Caucasian African American Hispanic Asian Other: \_\_\_\_\_

What foreign language do you speak? \_\_\_\_\_

Present Religion: \_\_\_\_\_

Are you handicapped or shut-in? \_\_\_\_\_ Explain: \_\_\_\_\_

Occupation: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

**CHILDREN: USE LAST NAME ONLY IF DIFFERENT FROM FAMILY NAME. Age 18 or over use separate form**

**Child 1**

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: Male Female

Caucasian African American Hispanic Asian Other

Present Religion: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**Sacraments:** (give date for those which have been received)

Baptism \_\_\_\_\_

1st Communion \_\_\_\_\_

Confirmation \_\_\_\_\_

**Child 2**

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: Male Female

Caucasian African American Hispanic Asian Other

Present Religion: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**Sacraments:** (give date for those which have been received)

Baptism \_\_\_\_\_

1st Communion \_\_\_\_\_

Confirmation \_\_\_\_\_

**Child 3**

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: Male Female

Caucasian African American Hispanic Asian Other

Present Religion: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**Sacraments:** (give date for those which have been received)

Baptism \_\_\_\_\_

1st Communion \_\_\_\_\_

Confirmation \_\_\_\_\_

**Child 4**

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: Male Female

Caucasian African American Hispanic Asian Other

Present Religion: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

**Sacraments:** (give date for those which have been received)

Baptism \_\_\_\_\_

1st Communion \_\_\_\_\_

Confirmation \_\_\_\_\_