Holy Spirit Parish Registration Form

37588 Fremont Boulevard, Fremont, CA 94536 510-797-1660 HolySpiritFremont.org

Address:			**Apt.#:**	**Envelope Number:**
City:	**Zip Code**	**Home Telephone #:**	**Cell #:**	**Business #:**
E-mail Address:			**Today's Date:**	**Years in Parish:**

INFORMATION OF FAMILY MEMBERS LIVING AT ABOVE ADDRESS (Please add other members on back.)

	HEAD	SPOUSE	CHILD	CHILD	OTHER
First Name					
Last Name					
Sex (F/M)					
Birth Date					
Marital Status	Church married single married widowed separated divorced	Church married single married widowed separated divorced			
Religion (catholic) (protestant) (other)					
Other Languages					
Education: Highest Grade Level or Degree					
Occupation					
Baptism Date					
1st Com. Date					
Confirmation Date					
Attending Faith Formation?	**Yes or No**	**Yes or No**	**Yes or No**	**Yes or No**	**Yes or No**

Church Attendance: _Regular _Frequent _Occasional _Seldom **Would you like the Catholic Voice newspaper? Y/ N**

MasterRegForm - rev:22May2012 **FOR RECTORY USE ONLY:** EFT: Y/N; ___ brochures __ PDS __ bulletin __ CVoice __OSV __CC __WC