Good Shepherd Parish
Family Registration Information

Rev 10/2015

Please Print

Date: _____

Family Name: _____ Phone 1: (note if house or cell #):_____

Mailing Address: _____ Phone 2: (note if house or cell #):_____

Street Address: _____ Email 1: _____ Email 2: _____
(if different)

Have you moved here from another parish? _____ If yes, which one? _____

Would you like to receive our bimonthly church offertory envelopes? _____ (We also have a secure, online giving option at: www.goodshepherdparish.us)

Would you like to find out about volunteer opportunities for the parish? _____ If so, please list your interests on the line below:

_____

First & Middle Names (Maiden Name if applies)	Gender M / F	Date of Birth	Religion	Baptized Yes or No	1st Reconciliation Yes or No	1st Communion Yes or No	Confirmation Yes or No	Marital Status	Married by a Priest, Deacon, or Other?	Previous Marriage?	Annulled?