Date: _____

Sacred Heart Parish - Gladwin

MAILING NAME AND ADDRESS

LAST NAME	FIRST NAME	INITIAL	HOME PHONE	CELL PHONE
ADDRESS	CITY	STATE	ZIP	E-MAIL ADDRESS

FAMILY MEMBERS: **SACRAMENTS**

FIRST NAME	LAST NAME (IF DIFFERENT)	BIRTHDATE	MARRIED BY PRIEST	BAPTISM	EUCHARIST	RECONCILIATION	CONFIRMATION	EMPLOYED/ RETIRED	OCCUPATION
MALE HEAD									
FEMALE HEAD	MAIDEN NAME								
OTHER ADULT									

CHILDREN LIVING AT HOME UNDER THE AGE OF 18 **SACRAMENTS**

FIRST NAME	LAST NAME (IF DIFFERENT)	BIRTHDATE	SEX	BAPTISM	EUCHARIST	RECONCILIATION	CONFIRMATION	GRADE
1								
2								
3								

Are you currently registered @ a parish? Yes or No **If yes, where?** _____

Is this an additional parish registration? Yes or No **If yes, home parish** _____

MEMBERS WITH SPECIAL NEEDS

	SHUT IN	HANDICAPPED

OFFICE USE ONLY Envelope #_____ Entered into Shelby on _____ Entered into Diocese on _____

Please send a copy to the Diocese