

PRINT all answers.
Please answer all questions.

Drop in Sunday collection
OR mail to St Brigid & OLA Parish Office
59 Main Street, Millbury, MA 01545

ST BRIGID AND OUR LADY OF THE ASSUMPTION PARISH REGISTRATION

Date _____

FAMILY SURNAME _____ **HOME TELEPHONE#** _____

Mailing Address _____ City _____ Zip Code _____

Street Address _____ City _____ ZIP Code _____

SPOUSE/SINGLE ADULT Include Full Name – include Mr., Mrs., Miss, or Ms.

First Name _____ Middle Name _____ Last Name _____

Birth Date _____ Occupation _____ Employer _____

Religion _____ Maiden Name _____ Highest School Grade Completed _____

Cell Phone _____ Home Phone _____ Email _____

Marital Status (circle one) Single Separated Married Divorced Widowed

Catholic Sacraments Celebrated:

- Baptism - Date and Place (if known) _____
- Communion _____
- Reconciliation/Confession _____
- Confirmation - Date and Place (if known) _____
- Marriage-Date/Place of Catholic Marriage: _____

SPOUSE/SINGLE ADULT Include Full Name – include Mr., Mrs., Miss, or Ms.

First Name _____ Middle Name _____ Last Name _____

Birth Date _____ Occupation _____ Employer _____

Religion _____ Maiden Name _____ Highest School Grade Completed _____

Cell Phone _____ Home Phone _____ Email _____

Marital Status (circle one) Single Separated Married Divorced Widowed

Catholic Sacraments Celebrated:

- Baptism - Date and Place (if known) _____
- Communion _____
- Reconciliation/Confession _____
- Confirmation - Date and Place (if known) _____
- Marriage-Date/Place of Catholic Marriage: _____

CHILDREN

Full Name	Gender	Birth Date
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School	Grade
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Catholic Sacraments Celebrated:

- Baptism - Date and Place _____
- Communion _____
- Reconciliation/Confession _____
- Confirmation - Date and Place _____

Full Name	Gender	Birth Date
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School	Grade
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Catholic Sacraments Celebrated:

- Baptism - Date and Place _____
- Communion _____
- Reconciliation/Confession _____
- Confirmation - Date and Place _____

Full Name	Gender	Birth Date
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School	Grade
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