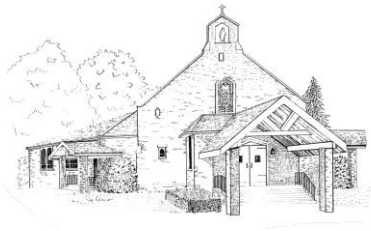

OUR LADY OF THE LAKE PARISH

294 Sparta Avenue, Sparta, NJ 07871
(973) 729-6107
www.ourladyofthelake.org

PARISH REGISTRATION FORM

Dear Parishioner:

Thank you for taking the time to complete and return this parish census form. This information enables us to serve you better, and run our church more efficiently in the Catholic community.

THIS INFORMATION WILL BE HELD IN THE STRICTEST CONFIDENCE
FOR PASTORAL USE ONLY.

PLEASE PRINT CLEARLY

FAMILY INFORMATION

FAMILY LAST NAME _____

PRIMARY/CELL NO. _____ **E-MAIL** _____

STREET ADDRESS _____

PO BOX OR APARTMENT# _____

CITY _____ **STATE** _____ **ZIP** _____

Number of Adults living in household: _____ **Number of Minor children in household:** _____

Ministry/Group Participation to Consider: Please (circle) any of interest below:

- Ushers
- Lectors
- Eucharistic Ministers
- Choir
- Altar Servers
- Catechists
- Sacristy Care
- Prayer Groups
- RCIA
- Legion of Mary
- Knights of Columbus
- Arimathea (assisting with funerals)
- Social ministry efforts are announced seasonally

OFFICE USE ONLY: **Registration Date** _____ **Envelope #** _____

ADULT FAMILY MEMBER #1 - Head of Household (PLEASE PRINT LEGIBLY)

FIRST, MIDDLE, LAST (*PLEASE PRINT)*

GENDER ☐ MALE ☐ FEMALE: MAIDEN NAME:_____	DATE OF BIRTH	PLACE OF BIRTH

SACRAMENTS

BAPTISM? ☐ YES ☐ NO
Denomination _____
Church of Baptism _____
City, State _____

1ST COMMUNION ☐ YES ☐ NO
CONFIRMATION ☐ YES ☐ NO

MARITAL STATUS:
☐ Single
☐ Engaged
☐ Married
☐ Separated
☐ Divorced
☐ Annulled
☐ Remarried
☐ Widowed

DATE OF MARRIAGE ___ ___ ___ ___ ___ ___ ___ ___
M M D D Y Y Y Y

Were you married by a Catholic Priest?
☐ YES ☐ NO

ADULT FAMILY MEMBER #2 (PLEASE PRINT LEGIBLY))

FIRST, MIDDLE, LAST (*PLEASE PRINT)*

GENDER ☐ MALE ☐ FEMALE: MAIDEN NAME:_____	DATE OF BIRTH	PLACE OF BIRTH

RELATIONSHIP TO MEMBER #1

SACRAMENTS

BAPTISM? ☐ YES ☐ NO
Denomination_____
Church of Baptism, City, State_____
_____

1ST COMMUNION ☐ YES ☐ NO
CONFIRMATION ☐ YES ☐ NO

MARITAL STATUS:
☐ Single
☐ Married
☐ Remarried
☐ Separated
☐ Divorced
☐ Widow
☐ Widower
☐ Other _____

YOU WILL BE ASKED TO PROVIDE PROOF OF SACRAMENTS
WHEN YOUR CHILD ENTERS RELIGIOUS EDUCATION CLASSES.
REGISTRIES ARE KEPT OF SACRAMENTS RECEIVED AT OUR LADY OF THE LAKE

DEPENDENT CHILD #1 (PLEASE PRINT LEGIBLY)

FIRST , MIDDLE, LAST (*PLEASE PRINT)*		DATE OF BIRTH
RELATIONSHIP TO HEAD OF HOUSEHOLD	GENDER ☐ MALE ☐ FEMALE	PLACE OF BIRTH

SACRAMENTS RECEIVED:

BAPTISM? ☐ YES ☐ NO Church of Baptism: _____City, State_____

FIRST COMMUNION? ☐ YES ☐ NO

CONFIRMATION? ☐ YES ☐ NO Church of Confirmation: _____City, State_____

DEPENDENT CHILD #1 (PLEASE PRINT LEGIBLY)

FIRST , MIDDLE, LAST (*PLEASE PRINT)*		DATE OF BIRTH
RELATIONSHIP TO HEAD OF HOUSEHOLD	GENDER ☐ MALE ☐ FEMALE	PLACE OF BIRTH

SACRAMENTS RECEIVED:

BAPTISM? ☐ YES ☐ NO Church of Baptism: _____City, State_____

FIRST COMMUNION? ☐ YES ☐ NO

CONFIRMATION? ☐ YES ☐ NO Church of Confirmation: _____City, State_____

DEPENDENT CHILD #3 (PLEASE PRINT LEGIBLY)

FIRST , MIDDLE, LAST (*PLEASE PRINT)*		DATE OF BIRTH
RELATIONSHIP TO HEAD OF HOUSEHOLD	GENDER ☐ MALE ☐ FEMALE	PLACE OF BIRTH

SACRAMENTS RECEIVED:

BAPTISM? ☐ YES ☐ NO Church of Baptism: _____City, State_____

FIRST COMMUNION? ☐ YES ☐ NO

CONFIRMATION? ☐ YES ☐ NO Church of Confirmation: _____City, State_____

DEPENDENT CHILD #4 (PLEASE PRINT LEGIBLY)

FIRST , MIDDLE, LAST (*PLEASE PRINT)*		DATE OF BIRTH
RELATIONSHIP TO HEAD OF HOUSEHOLD	GENDER ☐ MALE ☐ FEMALE	PLACE OF BIRTH

SACRAMENTS RECEIVED:

BAPTISM? ☐ YES ☐ NO Church of Baptism: _____City, State_____

FIRST COMMUNION? ☐ YES ☐ NO

CONFIRMATION? ☐ YES ☐ NO Church of Confirmation: _____City, State_____