Our Lady of the Sacred Heart Parish Registration Form (Please PRINT Clearly)

Date					
Family (Last) Name					
(Full Name) Head of Household					
(Full Name) Spouse Maiden					
Address					
City	_ State Zip				
Phone	(Circle One) HOME	CELL			
Title for Mailing Label:Mr. & M	rsMrMrs.	MsMiss			
Marital Status: Married Sir	ngle Widowed S	eparated Divorced			
If Married: Church & Date of Marriage _					
Married by Priest or Deacon? _	Yes No				
Parish Ministries or Organizations that y	ou would like to participate in: (List fami	ly members name next to ministry/orgar	nization)		
Bereavement Group	St. Vincent de Paul	Faith Formation/ Confirmation Teacher	Lector		
Eucharistic Minister	Altar Server	Choir	Altar & Rosary		
Holy Name Society	Seniors Group	Ushers	KCC/CYO		

OVER >>>

Please complete for **EACH** member of the family registering at this time:

PLEASE PRINT CLEARLY

First & Middle			RELIGION	Baptism	Confirmation	Occupation	Highest	Cell	Email
Name	Sex	Birth	Catholic			Or	Degree	Phone	
		Date		Date &	Date & Place	School/Grade	Grade		
(Include Last if			Baptist,	Place			Completed		
different)			Congregational,						
			Episcopal						
			Lutheran, etc.						
Head	М								
	F								
Spouse									
•	М								
	F								
Child									
	М								
	F								
Child									
	М								
	F								
	'								
Child									
	М								
	F								

Please Mail to: Our Lady of the Sacred Heart Parish, 3148 Abbott Road, Orchard Park, NY 14127

Scan and email to: Rectory@OLSHOP.org