

Envelope No.	Family Primary Last Name:					Date:		
<u>Code</u>	Address:					Apt. No.		
(H) Husband (W) Wife	City:				State:		Zip:	
(MN) Maiden Name	Telephone 1 (Home):			Telephone 2 (Cell):			Telephone (3) Cell:	
(SH) Single Head Household	Preferred Mailing Title:					E-mail:		
						<input type="checkbox"/> Married	Date of	
<u>First Name (See Code above)</u>	<u>Last Name</u>	<u>Date of Birth</u>	<input type="checkbox"/> <u>Baptized</u>	<input type="checkbox"/> <u>1st Comm.</u>	<input type="checkbox"/> <u>Confirmed</u>	<u>by Priest</u>	<u>Death</u>	<u>Occupation or School & Grade</u>
(H)								
(W)								
(MN)								
(SH)								
<input type="checkbox"/> Male Child 1st Name								
<input type="checkbox"/> Female Child 1st Name	<u>Child Last Name</u>	<u>Date of Birth</u>	<input type="checkbox"/> <u>Baptized</u>	<input type="checkbox"/> <u>1st Comm.</u>	<input type="checkbox"/> <u>Confirmed</u>			<u>School or Grade</u>
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Other Registered Relatives?								
Names & Relationship								