



Registration Date: \_\_\_\_\_

Check here if you do not wish to receive Mail  Email  GA Bulletin

Mailing Name: \_\_\_\_\_

Please mark each box if you would like us to  
Publish your phone, address and/or email  
In Parish Directory

Last Name: \_\_\_\_\_

(This will not be shared outside the Parish)

First Name(s): \_\_\_\_\_

Publish Phone ?      Publish Address?      Publish E-mail?

Family E-mail: \_\_\_\_\_

                                          

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Language: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Emg Phone: \_\_\_\_\_

Are you currently registered at another Parish \_\_\_\_\_ Name of Parish \_\_\_\_\_

(In the Archdiocese of Denver)

### FAMILY INFORMATION

Marital Status: Single \_\_\_ Married \_\_\_ Divorced \_\_\_ Separated \_\_\_ Widowed \_\_\_

Married by Priest or Deacon? Yes \_\_\_ No \_\_\_ Date of Marriage: \_\_\_\_\_

	ADULT	ADULT
<b>Name</b>		
<b>Sex</b>	Male ___ Female ___	Male ___ Female ___
<b>Birth Date</b>	Month ___ Day ___ Year _____	Month ___ Day ___ Year _____
<b>Religion</b>		
<b>Sacramental Information</b>	Baptized ___ Catholic ___ RCIA ___ Reconciliation ___ First Eucharist ___ Confirmation ___	Baptized ___ Catholic ___ RCIA ___ Reconciliation ___ First Eucharist ___ Confirmation ___
<b>Cell Phone</b>		
<b>E-mail</b>		
<b>Occupation</b>		
<b>Employer</b>		
<b>Work Phone</b>		

# CHILDREN INFORMATION

CHILD'S NAME	BIRTH DATE	SEX	SCHOOL ATTENDING	SPECIAL NEEDS
Check if Sacrament received. Add date if known	Baptism __ First Eucharist __		Catholic __ Confirmation __	Reconciliation __
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