

# St Elizabeth Seton Parish Family Registration

Reg Date:  /  /

520 Ridgebury Rd, Ridgefield, CT 06877 (203) 438-7292

Last Name:  First Name(s):   
 Mailing Name (ie Mr. & Mrs. John Doe)   
 Address:  Add2:   
 City:  State:  Zip:    
 Area Code:  Home Phone:  Emerg. Phone:   
 Family Email:  Env#:

## Individual Member Information

Parish Status: <small>(Active, Inactive)</small> Role: <small>(Head of House, Husband, Wife etc.)</small> First Name / Nickname: Gender: DOB (mm/dd/yyyy): Email:  Work Phone/Cell Phone: First Language: Occupation/Employer:	<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> Male / Female (Maiden) <input type="text"/> <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> Male / Female (Maiden) <input type="text"/> <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/>
Sacramental Info: Dates (mm/dd/yyyy): <small>(Single, Married, Separated, Divorced, Annulled)</small> Marital Status:	Baptized? <input type="checkbox"/> Catholic? <input type="checkbox"/> <input type="text"/> / <input type="text"/> / <input type="text"/> Reconcil? <input type="checkbox"/> First Eucharist? <input type="checkbox"/> Confirmed? <input type="checkbox"/> <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> Valid Catholic Marriage? <input type="checkbox"/>	Baptized? <input type="checkbox"/> Catholic? <input type="checkbox"/> <input type="text"/> / <input type="text"/> / <input type="text"/> Reconcil? <input type="checkbox"/> First Eucharist? <input type="checkbox"/> Confirmed? <input type="checkbox"/> <input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> / <input type="text"/>

Are there any members of your household who would like to be visited by a priest?

## Dependent Children Information

	Relationship to Head of Household	First Name / Last Name	Gender	Birthdate & Birthplace	H.S. Grad Yr	School First Language
1.		<input type="text"/> / <input type="text"/>	M / F	<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
	Check if Sacrament Received. Add Date if known.	Baptism <input type="checkbox"/>	Catholic? <input type="checkbox"/>	Eucharist <input type="checkbox"/>	Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>
		<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
2.		<input type="text"/> / <input type="text"/>	M / F	<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>
	Check if Sacrament Received. Add Date if known.	Baptism <input type="checkbox"/>	Catholic? <input type="checkbox"/>	Eucharist <input type="checkbox"/>	Reconciliation <input type="checkbox"/>	Confirmation <input type="checkbox"/>
		<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
3.		<input type="text"/> / <input type="text"/>	M / F	<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>

Please fill in all blank boxes and provide changes where necessary. If need to add additional members please use a second form.