

Holy Spirit Parish at Geist
Parish Registration Form

Registration No. _____

Date Registered _____

MALE
Last Name First Middle

Street

City/State/Zip

Subdivision

Home Phone _____ Cell Phone _____

e-mail address _____

Birth Date _____ City/State _____

Occupation _____

Employer _____

—

Work Phone _____

High School _____

College _____

Degree _____ Mo/Yr _____

College _____

Advance Degree _____ Mo/Yr _____

Languages Spoken (other than English) _____

Religion _____

Marital Status: _____ Married/Date _____

_____ Single _____ Divorce

_____ Widowed

Sacraments Received:

_____ Baptism Mo _____ Yr _____

_____ Reconciliation Mo _____ Yr _____

_____ First Communion Mo _____ Yr _____

_____ Confirmation Mo _____ Yr _____

Most Recent Parish Registered _____

Do you wish to be in the Parish Directory? _____

FEMALE
Last Name Middle First

Street

City/State/Zip

Subdivision

Home Phone _____ Cell Phone _____

e-mail address _____

Birth Date _____ City/State _____

Occupation _____

Employer _____

—

Work Phone _____

High School _____

College _____

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Marital Status: _____ Married/Date _____

_____ Single _____ Divorced

_____ Widowed

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_____ Baptism Mo _____ Yr _____

_____ Reconciliation Mo _____ Yr _____

_____ First Communion Mo _____ Yr _____

_____ Confirmation Mo _____ Yr _____

Most Recent Parish Registered _____

Do you wish to be in the Parish Directory? _____

Holy Spirit Parish at Geist
Parish Registration Form

PARISH CENSUS FOR CHILDREN

Last Name _____ First _____ Middle _____
Sex _____ Date of Birth _____ City/State _____
Religion _____ Name of School _____ Grade _____

Sacraments: _____ Baptism Mo _____ Yr _____ _____ Holy Communion Mo _____ Yr _____
 _____ Reconciliation Mo _____ Yr _____ _____ Confirmation Mo _____ Yr _____

Last Name _____ First _____ Middle _____
Sex _____ Date of Birth _____ City/State _____
Religion _____ Name of School _____ Grade _____

Sacraments: _____ Baptism Mo _____ Yr _____ _____ Holy Communion Mo _____ Yr _____
 _____ Reconciliation Mo _____ Yr _____ _____ Confirmation Mo _____ Yr _____

Last Name _____ First _____ Middle _____
Sex _____ Date of Birth _____ City/State _____
Religion _____ Name of School _____ Grade _____

Sacraments: _____ Baptism Mo _____ Yr _____ _____ Holy Communion Mo _____ Yr _____
 _____ Reconciliation Mo _____ Yr _____ _____ Confirmation Mo _____ Yr _____

Last Name _____ First _____ Middle _____
Sex _____ Date of Birth _____ City/State _____
Religion _____ Name of School _____ Grade _____

Sacraments: _____ Baptism Mo _____ Yr _____ _____ Holy Communion Mo _____ Yr _____
 _____ Reconciliation Mo _____ Yr _____ _____ Confirmation Mo _____ Yr _____

Last Name _____ First _____ Middle _____
Sex _____ Date of Birth _____ City/State _____
Religion _____ Name of School _____ Grade _____

Sacraments: _____ Baptism Mo _____ Yr _____ _____ Holy Communion Mo _____ Yr _____
 _____ Reconciliation Mo _____ Yr _____ _____ Confirmation Mo _____ Yr _____

Additional Comments:

