Our Lady of Perpetual Help Catholic Church

New Member Registration Form

DATE OF REGISTRATION	ID/ENV #	DIOCESAN #
FAMILY INFORMATION Plea	ase print	
Family Name:		
Home Phone: ()		Unlisted: YES NO
Street Address:		
City/State/Zip Code		
☐ Please register us for S	unday envelopes. <i>(6week cycle n</i>	nailed directly to your home)
☐ Please send us a set of	temporary tithing envelopes.	
☐ Please send us an E-Tit	hing enrollment form (Auto withd	rawal from your banking institution.)
☐ We would like to subscri	be to the Faith West Tennessee Catl	nolic Magazine \$18.00 Annually
■ We are interested in	☐Lector ☐Eucharistic Minister	□Usher □PRE Teacher
MEMBER INFORMATION		
Head of Household: (First, N	Лiddle, (Maiden), Last)	
Salutation Title: Mr., Mrs.,	Mr. & Mrs., Dr. & Mrs., Dr. & Dr.	
Work Phone: ()	Cell Phone:	()
Member Email Address:		
		Gender: Male□ Female□
Occupation	Place of Employment_	
	□Single □Widowed □Separe	
Spouse Name: (First, Middle,	(Maiden), Last)	
		()
Member Email Address:		
Religion:	Date of Birth	Gender: Male□ Female□
Wedding Anniversary Date	□ <i>Ca</i>	itholic Marriage 🚨 Civil Marriage

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Children and/or Other Household Members (Living with, or dependent upon you):

Child/Other: (First, Middle,(Maiden),Last) _		
Relationship (Son, Daughter, Mother-Ir	n-Law, etc)	
Date of Birth		Gender: Male 🔲 🛮 Female 🖵
School:	Grade	PRE Enrolled Yes No
Sacraments	-	
Child/Other: (First, Middle,(Maiden),Last) _		
Relationship (Son, Daughter, Mother-Ir	n-Law, etc)	
Date of Birth		Gender: Male 🔲 🛮 Female 🖵
School:	Grade	PRE Enrolled Yes No
Sacraments	•	
Child/Other: (First, Middle,(Maiden),Last) _		
Relationship (Son, Daughter, Mother-Ir		
Date of Birth		Gender: Male 🔲 Female 🖵
School:	Grade	PRE Enrolled Yes No
Sacraments	-	
Child/Other: (First, Middle,(Maiden),Last) _		
Relationship (Son, Daughter, Mother-Ir	n-Law, etc)	
Date of Birth		Gender: Male $oldsymbol{\square}$ Female $oldsymbol{\square}$
School:	Grade	PRE Enrolled Yes No
Sacraments	-	

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