Family Information Questionnaire

So that we may serve you better, please fill in the information below as completely and accurately as possible. This will be used for the Parish history records.

	Date: _		
Head of Household:			
Name: Mr./Mrs./Miss			
First	Middle	Last	
Marital Status:	Maiden Name:		
Address:	City:	State: Zip:	
Home Phone: ()	Other Phone: ()		
Work Phone: ()	Employer: ()		
E-mail Address:			
Date of birth://	Date of Baptism://		
Name of Church of Baptism:		Location:	
Date of Confirmation://	Wedding Date://		
Transfer member from previous parish	? List Parish/City/State:		
Spouse:			
Nama: Mr /Mrs /Miss			
Name: Mr./Mrs./Miss First	Middle	Last	
Marital Status:	Maiden Name:		
Address:	City:	State: Zip:	
Home Phone: ()			
Work Phone: ()	Employer: ()		
E-mail Address:			
Date of birth:/	Date of Baptism://		
Name of Church of Baptism:		Location:	
Date of Confirmation://			
Transfer member from previous parish	? List Parish/City/State:		

Additional Family Members in your household:

Name: Mr./Mrs./Miss			
First	Middle	Last	
Address:	City:	State:	Zip:
Home Phone: ()	Other Phone: ()_		
E-mail Address:			
Date of birth:/	Date of Baptism://_	_	
Name of Church of Baptism:		Location:	
Date of Confirmation:/			
Name: Mr./Mrs./MissFirst		Last	
			7.
Address:			
Home Phone: ()	Other Phone: ()_		
E-mail Address:			
Date of birth:/	Date of Baptism://_		
Name of Church of Baptism:		Location:	
Date of Confirmation:/			
Name: Mr./Mrs./Miss			
First	Middle	Last	
Address:	City:	State:	Zip:
Home Phone: ()	Other Phone: ()_		
E-mail Address:			
Date of birth:/	Date of Baptism://_	_	
Name of Church of Baptism:		Location:	
Date of Confirmation: / /			

^{*} Please list additional family members on a separate sheet of paper.