

Date of Registration \_\_\_\_\_

## Immaculate Conception Church Registration Form

Family Last Name \_\_\_\_\_

Marital Status (please circle): Single / Married / Separated / Divorced / Widowed

Catholic or Non-Catholic Date of Birth

Full name of Member #1 \_\_\_\_\_ or \_\_\_\_\_

Full name of Member #2 \_\_\_\_\_ or \_\_\_\_\_

Maiden name (Very important—please list!) \_\_\_\_\_

Mailing Address \_\_\_\_\_

Residential Address \_\_\_\_\_  
(if different from mailing address)

Telephone Number \_\_\_\_\_ Is telephone # unlisted (yes or no)? \_\_\_\_\_

Email Address \_\_\_\_\_

Occupation of Member #1 \_\_\_\_\_ Retired (yes or no?) \_\_\_\_\_

Occupation of Member #2 \_\_\_\_\_ Retired (yes or no?) \_\_\_\_\_

Date of Marriage (if applicable) \_\_\_\_\_

Parish where Married (if applicable) \_\_\_\_\_

Previous Parish \_\_\_\_\_

Children (if applicable)  
first / middle / last

| first / middle / last | Date of Birth | .....Please circle yes or no..... |                 |              |
|-----------------------|---------------|-----------------------------------|-----------------|--------------|
|                       |               | Baptism                           | First Communion | Confirmation |
| .....                 | .....         | Yes / No                          | Yes / No        | Yes / No     |
| .....                 | .....         | Yes / No                          | Yes / No        | Yes / No     |
| .....                 | .....         | Yes / No                          | Yes / No        | Yes / No     |
| .....                 | .....         | Yes / No                          | Yes / No        | Yes / No     |
| .....                 | .....         | Yes / No                          | Yes / No        | Yes / No     |

Please use reverse for additional children

Please return this completed form to the parish office at 25 Parker Street, Indian Orchard, MA 01151  
Call us at (413) 543-3627 with questions.

**Children (continued from page 1)**

first / middle / last

Date of Birth

.....Please circle yes or no.....

Baptism

First  
Communion

Confirmation

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Yes / No  
Yes / No  
Yes / No  
Yes / No

Yes / No  
Yes / No  
Yes / No  
Yes / No

Yes / No  
Yes / No  
Yes / No  
Yes / No

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Parish Office Use Only:**

Family # Assigned \_\_\_\_\_

Entered in Database \_\_\_\_\_

Add on Envelope List \_\_\_\_\_

Temporary Envelopes \_\_\_\_\_

Welcome Letter Mailed \_\_\_\_\_

Census Form Mailed \_\_\_\_\_

Added to CCD List \_\_\_\_\_