

# PARISH MEMBERSHIP REGISTRATION FORM - GOOD SHEPHERD CATHOLIC CHURCH

Date: \_\_\_\_\_ # \_\_\_\_\_

**Family Name**

Address: \_\_\_\_\_ Apt \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone Head of House: \_\_\_\_\_ Cell Phone Spouse: \_\_\_\_\_ Home Phone: \_\_\_\_\_

E-Mail Head of House: \_\_\_\_\_ E-Mail Spouse: \_\_\_\_\_

Marital Status:  Catholic Church Marriage  Civil Marriage  Common Law  Single

Please indicate YES or NO for sacrament received

Role in Family Head of House	First, Middle & Last Name as appears on birth certificate	Male or Female	Date of Birth	Baptism	First Communion	Confirmation	Ethnicity White/Hispanic/ Black/Asian
Spouse							
Child							
Child							
Child							
Child							
Child							
Child							

Language spoken at home:  English  Spanish  Bilingual English/Spanish  Bilingual English/Other rev 01/19

Mass Time(s) you usually attend:

Saturday 5:30pm Vigil Mass in English  Sunday 7:15am English  Sunday 1:30pm Spanish

Saturday 7:00pm Spanish (Neo-Catechumenal Mass)  Sunday 8:45am Spanish  Sunday 3:15pm Spanish

Sunday 10:30am English  Sunday 5:30pm English

Sunday 12:00pm Spanish  Sunday 7:15pm Spanish