

St. Mary's or Ss. Peter & Paul Parish Family Registration Omaha, NE 68107 - (402) 731-4578

FOR OFFICE USE ONLY
Env # _____
Entry Date _____

Last Name: _____

Mailing Name (i.e.: Mr. & Mrs. John Doe): _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ His Cell: _____ Her Cell: _____

Family Email: _____ Status: Single Married Widowed Separated Divorced Annulled

Date Married: _____ Were you married by a Priest Yes No If not, would you like to have your marriage blessed Yes No

Individual Member Information

First Name: _____ Nickname: _____ Maiden name: _____

Gender: Male Female Date of Birth: _____ Religion: _____ Email: _____

Occupation: _____ Employer: _____ Work Phone: _____

Sacramental Information:

Baptism Yes No If yes, where? _____ Reconciliation Yes No Eucharist Yes No Confirmation Yes No

Individual Member Information

First Name: _____ Nickname: _____ Maiden name: _____

Gender: Male Female Date of Birth: _____ Religion: _____ Email: _____

Occupation: _____ Employer: _____ Work Phone: _____

Sacramental Info: Baptism Yes No If yes, where? _____

Reconciliation Yes No Eucharist Yes No Confirmation Yes No (See back of registration for dependents)

Dependent Children Information

First Name: _____ Last Name: _____ Gender: Male Female

Date of Birth: _____ Birth Place: _____ Grade: _____ School: _____

Sacramental Information: Baptism Yes No If yes, where? _____
Reconciliation Yes No Eucharist Yes No Confirmation Yes No

First Name: _____ Last Name: _____ Gender: Male Female

Date of Birth: _____ Birth Place: _____ Grade: _____ School: _____

Sacramental Information: Baptism Yes No If yes, where? _____
Reconciliation Yes No Eucharist Yes No Confirmation Yes No

First Name: _____ Last Name: _____ Gender: Male Female

Date of Birth: _____ Birth Place: _____ Grade: _____ School: _____

Sacramental Information: Baptism Yes No If yes, where? _____
Reconciliation Yes No Eucharist Yes No Confirmation Yes No

First Name: _____ Last Name: _____ Gender: Male Female

Date of Birth: _____ Birth Place: _____ Grade: _____ School: _____

Sacramental Information: Baptism Yes No If yes, where? _____
Reconciliation Yes No Eucharist Yes No Confirmation Yes No

First Name: _____ Last Name: _____ Gender: Male Female

Date of Birth: _____ Birth Place: _____ Grade: _____ School: _____

Sacramental Information: Baptism Yes No If yes, where? _____
Reconciliation Yes No Eucharist Yes No Confirmation Yes No