# Good Shepherd Catholic Parish

## Family Registration Form

Env#_____

Family Name: _____ Maiden Name _____ His Career/Job _____

Address: _____ His Cell Phone # _____ Her Career/Job _____

City: _____ State: ____ Zip: _____ Her Cell Phone # _____ Former Parish _____

His Email: _____ Her Email: _____

| Names (First & Middle) Adult(s) | Sex | Birth Date | Religion | Church/City Baptism (Date if known) | Church/City Confirmation (Date if known) | Sac. of Penance Yes/No | Status S/M/W/D | Date of Marriage & Church | Catholic Wedding Yes/ No |
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| Children | | | | | | | School Attending | Current Grade | |
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For tithing, choose your preference:

_____ Envelopes

_____ We Share (Online Giving)

What brings you to Good Shepherd? _____

Ministries Interested in: _____