

St. Francis of Assisi Catholic Church, 2450 NE 27th St., Bend OR 97701 **New/Update Family Registration Form**

Today's Date: ___ / ___ / ___

Family Name: _____

Local Address: Full Time Part Time

Street Address: _____

Mailing Address: _____

City, State, Zip: _____

Cell Phone 1: _____ **Emergency**

Cell Phone 2: _____ **Phone Num:** _____

(Please **circle primary** phone number)

Primary Email: _____

For Office use Only

Welcome Pkt Sent:

Envelope #: _____ ParishSOFT ID: _____ Date Entered: _____

2nd Residence: From ___ / ___ / ___ To ___ / ___ / ___

Street Address: _____

Mailing Address: _____

City, State, Zip: _____

Emergency Contact

Name/Relationship: _____

Primary Language: _____

2nd Email: _____

Will use Offertory Envelopes? Yes No Online Giving? Yes No If Homebound, would you like to receive Eucharist? Yes No

IF YOU NEED MORE SPACE FOR CHILDREN USE BACK OF THIS FORM OR ADDITIONAL PIECE OF PAPER

	Head of Household	Spouse	Children living at home			
			Child	Child	Child	Child
First Name:						
Last Name (if different):						
Maiden Name:						
Birth Date (xx/xx/xxxx):						
Marriage Date:						
Marital Status (see below):						
Religion:						
Gender (Male or Female):						
Ethnicity (see below):						
Occupation:						
Sacraments Received (please circle below):						
Baptism:	Y N	Y N	Y N	Y N	Y N	Y N
First Communion:	Y N	Y N	Y N	Y N	Y N	Y N
Confirmation:	Y N	Y N	Y N	Y N	Y N	Y N
Matrimony:	Y N	Y N	Y N	Y N	Y N	Y N

Marital Status Codes: MICC Married in Catholic Church MOCC Married Outside Catholic Church Divorced Separated Widowed Single Engaged

Ethnicity Codes: White/Caucasian Black/African American Hispanic/Latino Native American Asian/Pacific Islander Other