

**ST MARY CATHEDRAL  
OUR LADY OF MOUNT CARMEL  
Parish Registration Form**

This form can be used to: Register as a new parishioner or parish family, or to update existing parishioner data. All information is for internal parish use only.

**PLEASE PRINT**

**Date:** \_\_\_\_\_

<p style="text-align: center;"><b>St. Mary Cathedral</b>  <b>Mailing Address: 606 N Ohio Ave, Gaylord, MI 49735-1914</b>                  (Parish Office located in Diocesan Pastoral Center: 611 W North St)                  Phone: 989-732-5448 ~ Fax: 989-705-3585                  website: www.stmarycathedral.org</p>	<p>Please check one:  <input type="checkbox"/> <b>On-line giving:</b> visit: www.stmarycathedral.org, click on "Stewardship", "WeShare", or call parish office for assistance.   <input type="checkbox"/> I would like to receive envelopes (mailed to you bi-monthly)</p>
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<b>Family Info:</b>	<p><b>Head of Household:</b>                  Last Name: _____                  First Name: _____ Middle: _____                  Title: _____ Nick-name _____                  Maiden Name: _____                  Religion: _____                  Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female                  Birthdate: _____                  Occupation: _____                  Employer: _____                  Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed  <input type="checkbox"/> Divorced <input type="checkbox"/> Religious  <input type="checkbox"/> Other _____</p> <p><b>Sacraments:</b>                  Baptism: Yes No                  Church: _____                  City/State: _____                  1<sup>st</sup> Penance: Yes No                  1<sup>st</sup> Communion: Yes No                  Confirmation: Yes No                  Married on: _____                  Church: _____                  City/State: _____                  Were you married in the Catholic Church? Yes No                  Were you previously married? Yes No                  Has this marriage been annulled? Yes No</p>	<p><b>Spouse:</b>                  Last Name: _____                  First Name: _____ Middle: _____                  Title: _____ Nick-Name _____                  Maiden Name: _____                  Religion: _____                  Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female                  Birthdate: _____                  Occupation: _____                  Employer: _____                  Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed  <input type="checkbox"/> Divorced <input type="checkbox"/> Religious  <input type="checkbox"/> Other _____</p> <p><b>Sacraments:</b>                  Baptism: Yes No                  Church: _____                  City/State: _____                  1<sup>st</sup> Penance: Yes No                  1<sup>st</sup> Communion: Yes No                  Confirmation: Yes No                  Were you previously married? Yes No                  Has this marriage been annulled? Yes No</p>
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<b>St Mary Cathedral School Alumni:</b>	Did you graduate from St. Mary School? Yes No Graduation Year _____ Maiden Name if different _____	Did you graduate from St. Mary School? Yes No Graduation Year _____ Maiden Name if different _____
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<b>Phones: Email:</b>	Home: _____ Cell: _____ Work: _____ Family Email: _____ Personal Email: _____	Cell: _____ Work: _____ Personal Email: _____
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<b>Mailing Address:</b>	Mailing Address: _____ City/State/Zip: _____  Home Address: _____ City/State/Zip: _____ (if different from mailing address)	<b>Seasonal Address:</b>	Send mail to this address: From: Month _____ Day _____ To: Month _____ Day _____ Address: _____ City/State/Zip: _____ Phone: _____
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Please list all children that are living in the home from oldest to the youngest. If Child is 18 or older, they should fill out their own registration form. If you have more than 4 children, please list them on another form and attach it to this sheet.

<b>Child #1</b> Last Name: _____ First Name: _____ Middle: _____ Nickname: _____ Birthdate: _____ Religion: _____ Handicap: _____ Grade: _____ School Attending: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Sacraments:</b> Baptism: Yes No Church: _____ City/State: _____  1 <sup>st</sup> Penance: Yes No 1 <sup>st</sup> Communion: Yes No Confirmation: Yes No
<b>Child #2</b> Last Name: _____ First Name: _____ Middle: _____ Nickname: _____ Birthdate: _____ Religion: _____ Handicap: _____ Grade: _____ School Attending: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Sacraments:</b> Baptism: Yes No Church: _____ City/State: _____  1 <sup>st</sup> Penance: Yes No 1 <sup>st</sup> Communion: Yes No Confirmation: Yes No
<b>Child #3</b> Last Name: _____ First Name: _____ Middle: _____ Nickname: _____ Birthdate: _____ Religion: _____ Handicap: _____ Grade: _____ School Attending: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Sacraments:</b> Baptism: Yes No Church: _____ City/State: _____  1 <sup>st</sup> Penance: Yes No 1 <sup>st</sup> Communion: Yes No Confirmation: Yes No
<b>Child #4</b> Last Name: _____ First Name: _____ Middle: _____ Nickname: _____ Birthdate: _____ Religion: _____ Handicap: _____ Grade: _____ School Attending: _____ Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Sacraments:</b> Baptism: Yes No Church: _____ City/State: _____  1 <sup>st</sup> Penance: Yes No 1 <sup>st</sup> Communion: Yes No Confirmation: Yes No

#### PHOTO & PUBLICITY CONSENT

I understand that promotional pictures and videos (individual and group) of me and my family members (including minor children) may be taken during parish, school, diocesan and other events. I hereby give permission for images, names, ages, comments, parish/school, verbal or written remarks to be used for news and promotional materials for St. Mary Cathedral and School. This permission will remain in force unless withdrawn in writing by a letter to the Parish Office.

Signature: \_\_\_\_\_

#### OFFICE USE ONLY:

Date: \_\_\_\_\_ Entered by \_\_\_\_\_ Faith Magazine List \_\_\_\_\_ Ministry Form \_\_\_\_\_