

Stella Maris Parish
PARISHIONER INFORMATION

HEAD OF HOUSEHOLD

First Name:			Middle:			Last:		
Date of birth:			Religion:			Email:		
Maiden Name (if applicable):								
Household Address:								
City:			State:			ZIP Code:		
Home Phone:			Cell Phone:					
Seasonal Address:								
City:			State:			ZIP Code:		
When at seasonal address:								
Baptism Year:			City:			Church:		
1st Reconciliation Year:			City:			Church:		
1st Communion Year:			City:			Church:		
Confirmation Year:			City:			Church:		
Marriage:			City:			Church:		
Marital Status:			Recognized by Catholic Church:			Former Parish:		
Occupation or if retired former occupation:								
Any special needs for any family members:								
Interest in any parish activity or ministry:								
OTHER FAMILY ADULT								
Name (First, Middle, Last):						Cell Phone:		
Maiden Name (if applicable):								
Date of Birth:			Religion:			Email:		
Baptism Year:			City:			Church:		
1st Reconciliation Year:			City:			Church:		
1st Communion Year:			City:			Church:		
Confirmation Year:			City:			Church:		
Marriage: Date:			City:			Church:		
Recognized by Catholic Church:			Former Parish:					
Occupation or if retired former occupation:								
Interest in any parish activity or ministry:								
CHILDREN IN HOUSEHOLD								
First Name:			Middle:			Last:		
Date of birth:			Relationship:			Religion:		
Baptism Date:			City:			Church:		
1st Reconciliation Date:			City:			Church:		
1st Communion Date:			City:			Church:		
Confirmation Date:			City:			Church:		
School Attending:						Grade:		
Attending Faith Formation:						What Parish:		
Please list any additional children or household members on a separate sheet providing the information listed above.							Date:	

Envelopes or give electronically? (indicate method when submitting form to office)