



Registration Form

Mary Our Queen Roman Catholic Church
248 Savage Street
Plantsville, CT 06479
860-628-4901 Fax: 860-621-0610
moqueen@snet.net

For office use only:

Reg. date: _____
Envelope # _____
OSV: _____ MC: _____
EFT: _____

Please print all information and return to the above address or place in the collection basket. Thank you!

Family Last Name: _____ Former Parish: _____

Address: _____

Street Apt # City State Zip

Primary Phone: _____ unlisted? Cell/other Phone: _____

Email Address: _____

Do you prefer Online Giving? YES NO

Head of Household

Full Name: _____

Preferred/Nick Name: _____

Date of Birth: _____ Gender: M F

Employer: _____

Cell Phone: _____

Catholic? Y N Ethnic Background: _____

SACRAMENTS RECEIVED:

Baptism Date: _____ Place _____

1st Communion Date: _____ Place _____

Confirmation Date _____ Place _____

Matrimony Date: _____

Married by a Catholic priest or deacon? Yes No

Church/City where married: _____

Current Marital Status:
Married Single Divorced Annulment Widow(er)

Spouse

Full Name: _____

Preferred/Nick Name: _____

Date of Birth: _____ Gender: M F

Employer: _____

Cell Phone: _____

Catholic? Y N Ethnic Background: _____

SACRAMENTS RECEIVED:

Baptism Date: _____ Place _____

1st Communion Date: _____ Place _____

Confirmation Date _____ Place _____

Matrimony Date: _____

Married by a Catholic priest or deacon? Yes No

Church/City where married: _____

Current Marital Status:
Married Single Divorced Annulment Widow(er)

Mary Our Queen Catholic Church is here to support you and your family. This means that whatever you are dealing with matters to the Church. We are here to celebrate what is working and to talk with you as you face life's expected and unexpected challenges.

Please take a few moments to let us know about your family. How can we support you?: Are there members with special needs?

➔ Please fill out other side

DEPENDENTS LIVING AT HOME

all information is confidential

	Child 1	Child 2	Child 3	Child 4	Child 5
Include last name if different					
Date of Birth					
Gender: M F					
Baptism: Date & Location					
1st Holy Communion: Date & Location					
Confirmation: Date & Location					
School and Grade					

Additional Children at Home

Please list one child per line including Birthdate, Sacraments, School and Grade

Children away at college

Please list one per line and list Name (first, last), Birthdate, Email, School and Address
