

PARISH REGISTRATION FORM

St. Ambrose

Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_

Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Husband/Single Male: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Religion: \_\_\_\_\_\_\_\_\_\_\_\_\_ Baptized \_\_\_\_ 1st Communion \_\_\_ Confirmation \_\_\_\_

Wife/Single Female: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_

Maiden Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Religion: \_\_\_\_\_\_\_\_\_\_\_\_\_ Baptized \_\_\_\_ 1st Communion \_\_\_ Confirmation \_\_\_\_

Marital Status: Married\_\_\_ Single\_\_\_ Widowed\_\_ Divorced\_\_\_\_

Date of wedding \_\_\_/\_\_\_\_/\_\_\_\_

Church: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_ State: \_\_\_\_\_

If the marriage is considered invalid by the Catholic Church, is it possible to have situation rectified? Yes No

Children or other in household:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name | Birthdate | Job/School | Grade | Baptized | 1st Communion | Confirmed |
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*Please note that by registering with St. Ambrose Parish,*

*you will be receiving Contribution Envelopes and a subscription to the Criterion.*



REGISTRO A LA PARROQUIA

San Ambrosio

Nombre de la Familia: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fecha: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dirección:\_\_\_\_\_\_\_\_\_\_\_\_\_\_Ciudad: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Estado: \_\_\_\_\_

C.P: \_\_\_\_\_\_\_\_\_Teléfono:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:

Esposo/Hombre soltero: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fecha de Nac: \_\_\_/\_\_\_/\_\_\_

Ocupacion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Religión: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bautizado \_\_\_\_\_\_\_ 1ra Comunión \_\_\_\_\_Confirmación \_\_\_\_\_\_\_

Esposa/mujer soltera: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Apellido de soltera:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fecha de Nac.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ocupación: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Religión: \_\_\_\_\_\_\_\_\_\_\_\_\_

Bautizada \_\_\_\_\_\_\_ 1st Comunión \_\_\_\_\_\_\_ Confirmación \_\_\_\_\_\_\_\_\_\_

Estado Marital: Casado/a ࢱ Soltero/a ࢱ Viudo/a ࢱ Divorciado/a ࢱ

Fecha de la Boda \_\_\_/\_\_\_\_/\_\_\_\_ Iglesia: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ciudad: \_\_\_\_\_\_\_\_\_ Estado: \_\_\_\_\_

Si el matrimonio es considerado invalido por la Iglesia Católica, es posible que le revisemos su situación? Si ࢱ No ࢱ

Niños u otras personas que viven en la misma casa:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Nombre | Fecha de Nac. | Trabajo/ Esc. | Grado | Bautizado/a | 1ra Comunión | Confirmado/a |
|  |  |  |  |  |  |  |
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Tenga en cuenta que al registrarse en la parroquia de San Ambrosio,

recibirá sobres de contribución y una suscripción al Criterio.