

**Church of the Redeemer**  
**Catholic Diocese of Richmond**  
**Parish Registration Information**



8275 MEADOWBRIDGE RD.  
 MECHANICSVILLE, VA 23116

Welcome to Our Parish Community!

804-746-4911

The information you provide on this census form will be used exclusively within the Church.  
 Please type/print/circle your responses. Thank you!

Are you presently registered in this parish?  Yes  No

If yes, please state the year of original registration \_\_\_\_\_

Were you previously registered in another parish in the Diocese of Richmond?  Yes  No

If yes, please name the parish. \_\_\_\_\_

Signature of Person Completing Form: \_\_\_\_\_

Location: \_\_\_\_\_

Date:        /        /       

Household Mailing Information (please complete as you want mail addressed to your household, including title(s).)

Name(s): \_\_\_\_\_

P.O. Box, if any: \_\_\_\_\_ Home Phone: (    )    -    \_\_\_\_\_

Do we have permission to publish your home phone number with the parish?  Yes  No

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

City/State/Zip: \_\_\_\_\_

Are there any circumstances or information of which the parish should be aware?

\_\_\_\_\_

\_\_\_\_\_

Please provide directions to your home, **include subdivision names**, rural routes or street names which may be helpful in locating you.

\_\_\_\_\_

\_\_\_\_\_

	Name		E-mail Address (please type or print)
1	_____	=	_____
2	_____	=	_____
3	_____	=	_____
4	_____	=	_____
5	_____	=	_____

Parish No. (envelope): \_\_\_\_\_

Diocesan No.: \_\_\_\_\_

Area #: \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

for Office Use Only

# Household Member Information

Please only enter people who are presently residing in your household or who are temporarily away for college or military.

	Head 1	Head 2	<input type="checkbox"/> Other Adult <input type="checkbox"/> Child	<input type="checkbox"/> Other Adult <input type="checkbox"/> Child	<input type="checkbox"/> Other Adult <input type="checkbox"/> Child	<input type="checkbox"/> Other Adult <input type="checkbox"/> Child
<b>First Name</b> (or name used)						
<b>Last Name</b>						
<b>Personal Status*</b>						
<b>Date of Marriage</b>	/ /	/ /	/ /	/ /	/ /	/ /

\* MC = Marriage Catholic (Recognized by Church); MO = Marriage Other; S = Single; W = Widowed; D = Divorced; Sep = Separated; R = Member of Religious Order

<b>Religion+</b>						
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+ C = Catholic; OC = Other Christian; J = Jewish; OR = Other Religion; NR = No Religion

<b>Disability**</b>						
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\*\* B = Legally Blind; R = Mentally Retarded; H = Hearing Impaired; P = Physically Disabled; S = Shut In; O = Other (specify)

<b>1st Language ++</b> (if not English)						
<b>2nd Language ++</b>						

++ S = Spanish; C = Creole; V = Vietnamese; K = Korean; T = Tagalong; O = Other (specify)

<b>Occupation</b>						
<b>Company/School</b>						
<b>Business Phone</b>	( ) -	( ) -	( ) -	( ) -	( ) -	( ) -
<b>Present Grade</b> (children only)						
<b>Sex</b> (circle)	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F
<b>Ethnicity/Race ***</b>						

\*\*\* A=Asian; B=Black; H=Hispanic; N=Native American; W=White; O=Other (specify)

<b>Birthdate</b> (mm/dd/yy)	/ /	/ /	/ /	/ /	/ /	/ /
<b>Sacraments Received</b>	<input type="checkbox"/> Baptism <input type="checkbox"/> Communion <input type="checkbox"/> Confirmation <input type="checkbox"/> Marriage <input type="checkbox"/> 1 <sup>st</sup> Penance	<input type="checkbox"/> Baptism <input type="checkbox"/> 1 <sup>st</sup> Communion <input type="checkbox"/> Confirmation <input type="checkbox"/> Marriage <input type="checkbox"/> 1 <sup>st</sup> Penance	<input type="checkbox"/> Baptism <input type="checkbox"/> 1 <sup>st</sup> Communion <input type="checkbox"/> Confirmation <input type="checkbox"/> Marriage <input type="checkbox"/> 1 <sup>st</sup> Penance	<input type="checkbox"/> Baptism <input type="checkbox"/> 1 <sup>st</sup> Communion <input type="checkbox"/> Confirmation <input type="checkbox"/> Marriage <input type="checkbox"/> 1 <sup>st</sup> Penance	<input type="checkbox"/> Baptism <input type="checkbox"/> 1 <sup>st</sup> Communion <input type="checkbox"/> Confirmation <input type="checkbox"/> Marriage <input type="checkbox"/> 1 <sup>st</sup> Penance	<input type="checkbox"/> Baptism <input type="checkbox"/> 1 <sup>st</sup> Communion <input type="checkbox"/> Confirmation <input type="checkbox"/> Marriage <input type="checkbox"/> 1 <sup>st</sup> Penance
<input checked="" type="checkbox"/> <b>all received</b>						