

# Little Flower Parish

## Family Registration

6495 Lillian Highway, Pensacola, Fl. 32516 (850) 455-5641

Registration Date: \_\_/\_\_/\_\_

Contrib. Env.? Y / N for office use only Env# \_\_\_\_\_

### Family Information:

Last Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

First Name(s) \_\_\_\_\_

Family Email: \_\_\_\_\_

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

Permission to publish phone, address, email in Parish Directory

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

Publish Phone? Y / N Publish Address? Y / N Publish Email? Y / N

Zip: \_\_\_\_\_ - \_\_\_\_\_

School: \_\_\_\_\_

### Couple/Head of Household Information

Marital Status: \_\_\_\_\_ Married by Priest/Deacon? Y / N Anniversary Date: \_\_/\_\_/\_\_ Wedding Church/City: \_\_\_\_\_

### Husband/Head:

### Wife:

Active Catholic: Active / Inactive / Other: \_\_\_\_\_

Active / Inactive / Other \_\_\_\_\_

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

\_\_\_\_\_ (Maiden)

DOB: \_\_/\_\_/\_\_

\_\_/\_\_/\_\_

Sacramental Info: Baptized? Y / N Catholic? Y / N RCIA? Y / N

Baptized? Y / N Catholic? Y / N RCIA? Y / N

Reconcil? Y / N First Eucharist? Y / N Confirmed? Y / N Reconcil? Y / N First Eucharist? Y / N Confirmed? Y / N

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

\_\_\_\_\_

Work Phone: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_

### Children Information

#### Child Name:

#### DOB

#### Sex

#### Grad Year

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_ M / F \_\_\_\_\_ Special Needs: \_\_\_\_\_

Baptism Y / N Catholic? Y / N First Euch. Y / N Reconcil. Y / N Confirmation Y / N

Add Sacrament Date if known. \_\_/\_\_/\_\_ \_\_/\_\_/\_\_ \_\_/\_\_/\_\_ \_\_/\_\_/\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_ M / F \_\_\_\_\_ Special Needs: \_\_\_\_\_

Baptism Y / N Catholic? Y / N First Euch. Y / N Reconcil. Y / N Confirmation Y / N

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Please enter the correct information in space provided.