

Please **print legibly.**

WELCOME TO ST. EDNA! FAMILY RECORD FORM *(one per family)*

DATE _____
ID# _____
(for office use only)

Last Name _____ Family Salutation _____
Street Address _____ City, State, Zip _____
Phone# _____ / _____ / _____ CELL (head of household) _____ HOME (spouse) _____ / _____ CELL (spouse) _____
Email #1: _____ #2: _____

I would like to receive my contribution envelopes by mail (or) I would like to donate electronically (or) I would like information about electronic giving

| Adults | Sacraments | Miscellaneous |
|---|---|---|
| <p><i>Head of household:</i> First Name: _____ Middle Name _____ Last Name _____ Maiden Name _____ Informal Name (nickname) _____ Male _____ Female _____ Date of Birth _____ <i>Month/date/year</i></p> <p><i>Spouse</i> First Name: _____ Middle Name _____ Last Name _____ Informal Name (nickname) _____ Maiden Name _____ Male _____ Female _____ Date of Birth _____ <i>Month/date/year</i></p> | <p><i>It is very important that we have this information</i> Baptized? Yes No (year) _____ Church of Baptism _____ (city/state) _____ 1st Eucharist? Yes No (year) _____ 1st Reconciliation? Yes No _____ Confirmed in a Catholic Church? Yes No (year) _____ Married? Yes No (date) _____ Single _____ Widowed _____ Separated/Divorced _____</p> | <p>Religion _____ Language spoken at home other than English _____ Occupation: _____ Work Phone number _____ Title: _____</p> |
| <p>Baptized? Yes No (year) _____ Church of Baptism _____ (city/state) _____ 1st Eucharist? Yes No (year) _____ 1st Reconciliation? Yes No _____ Confirmed in a Catholic Church? Yes No (year) _____ Married? Yes No (date) _____ Single _____ Widowed _____ Separated/Divorced _____</p> | <p>Religion _____ Language spoken at home other than English _____ Occupation: _____ Work Phone number _____ Title: _____</p> | <p>Religion _____ Language spoken at home other than English _____ Occupation: _____ Work Phone number _____ Title: _____</p> |

~Please Fill Out Reverse Side~

| | |
|---|---|
| Children Living at Home And/or College Students | Sacraments |
| First Name _____ | Baptized? Yes _____ No (year) _____ |
| Middle Name: _____ | Church of Baptism _____ (city/state) _____ |
| Last Name _____ | 1 st Eucharist? Yes _____ No (year) _____ 1 st Reconciliation? Yes _____ No _____ |
| Informal Name (nickname) _____ | Confirmed in a Catholic Church? Yes _____ No (year) _____ |
| Male _____ Female _____ Date of Birth _____ | |
| First Name _____ | Baptized? Yes _____ No (year) _____ |
| Middle Name: _____ | Church of Baptism _____ (city/state) _____ |
| Last Name _____ | 1 st Eucharist? Yes _____ No (year) _____ 1 st Reconciliation? Yes _____ No _____ |
| Informal Name (nickname) _____ | Confirmed in a Catholic Church? Yes _____ No (year) _____ |
| Male _____ Female _____ Date of Birth _____ | |
| First Name _____ | Baptized? Yes _____ No (year) _____ |
| Middle Name: _____ | Church of Baptism _____ (city/state) _____ |
| Last Name _____ | 1 st Eucharist? Yes _____ No (year) _____ 1 st Reconciliation? Yes _____ No _____ |
| Informal Name (nickname) _____ | Confirmed in a Catholic Church? Yes _____ No (year) _____ |
| Male _____ Female _____ Date of Birth _____ | |
| Please use additional sheet for more family members | |
| ***** | |
| What area of volunteer ministry were you involved in at your previous parish/ or would like to be involved in? _____ | |
| _____ | |
| _____ | |
| May we contact you regarding our volunteer opportunities in this/these ministries? Yes _____ Not at this time _____ | |
| May a member of our Parish Life Commission contact you regarding upcoming parish events? Yes _____ Not at this time _____ | |

St. Edna Parish may use photographs and /or video footage of individuals, groups and families in a variety of Parish media. This media is intended to promote activities and events as well as the Parish, organizations and groups affiliated with St. Edna Parish. This may include, but not be limited to, St. Edna bulletin, website, posters, newsletters, advertisements and other public relations materials.

I give my permission for photographs or video footage of myself, my family and/or my children to be used in promotional materials by St. Edna Parish, its organizations and groups.

I do not give my permission for photographs or video footage of myself, my family and/or my children to be used in promotional materials by St. Edna parish, its organizations groups.

Printed Name: _____ Signed: _____ Date: _____