

# Immaculate Conception Church

Louisburg, Kansas

## Parish Registration Form

Please complete as much information as possible. When completed, please return this form to the parish office.

<b>Head of Household</b> <span style="float: right;"><b>Required</b></span>	<b>Mailing Address</b> <span style="float: right;"><b>Required</b></span>
<b>Title:</b> <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.  _____ First Name                      MI                      Last Name  <b>Suffix:</b> <input type="checkbox"/> Sr. <input type="checkbox"/> Jr. <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	<b>Street Address:</b> _____ _____ <b>City:</b> _____ <b>State:</b> _____ <b>Zip Code:</b> _____
<b>Spouse</b> <span style="float: right;"><b>Required</b></span>	<b>Contact Information</b> <span style="float: right;"><b>Required</b></span>
<b>Title:</b> <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.  _____ First Name                      MI                      Last Name  <b>Suffix:</b> <input type="checkbox"/> Sr. <input type="checkbox"/> Jr. <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV	<b>Email:</b> _____ <b>Primary Phone:</b> _____ <b>Cell Phone:</b> _____ <b>Business Phone:</b> _____

### Family Information Please fill in a box for each person living in your household including yourself and your spouse if applicable. (More on back)

Name:	Date of Birth:	Sacraments Received: <input type="checkbox"/> Yes <input type="checkbox"/> No
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Occupation:	Baptism Date:
Marital Status:	Work Phone:	1st Penance Date:
Relation:	Religion:	1st Communion:
Marriage Date:	Married in Catholic Church: <input type="checkbox"/> Yes <input type="checkbox"/> No	Confirmation Date:

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Marriage Date:	Married in Catholic Church: <input type="checkbox"/> Yes <input type="checkbox"/> No	Confirmation Date:

Marital Status: Single	Relation: Husband	Grandfather	Cousin
Married	Wife	Grandmother	
Widow(ed)	Son	Uncle	
Divorced	Daughter	Aunt	