

ST. MARGUERITE BOURGEOYS PARISH

138 Candlewood Lake Road, Brookfield, CT 06804
203.775.5117 | www.stmarguerite.org

Registration Date: _____
Envelope #: _____

Family Information:

Last Name: _____ First Name(s): _____
Mailing Name (ie. Mr. and Mrs. John Smith): _____
Address: _____
City: _____ State: _____ Zipcode: _____
Home Phone # (with area code): _____
Emergency Phone #: _____
Family Email: _____

Adult Member Information:

Parish Status (active/inactive): _____
Role (Head of Household, husband, wife): _____
First Name: _____
Last Name: _____
Gender: M/F (Maiden Name): _____
Date of Birth (mm/dd/yy): _____
Email: _____
Sacrament Info: Baptized? Y/N Catholic? Y/N
Penance? Y/N First Eucharist? Y/N Confirmed? Y/N
Work/Cell #: _____
Occupation & Employer: _____

Parish Status (active/inactive): _____
Role (Head of Household, husband, wife): _____
First Name: _____
Last Name: _____
Gender: M/F (Maiden Name): _____
Date of Birth (mm/dd/yy): _____
Email: _____
Sacrament Info: Baptized? Y/N Catholic? Y/N
Penance? Y/N First Eucharist? Y/N Confirmed? Y/N
Work/Cell #: _____
Occupation & Employer: _____

Dependent Children Information:

First Name	Last Name	Date of Birth	Gender
_____	_____	_____	M/F
Baptized? Y/N Catholic? Y/N	Penance? Y/N?	First Eucharist? Y/N?	Confirmed? Y/N

_____	_____	_____	M/F
Baptized? Y/N Catholic? Y/N	Penance? Y/N?	First Eucharist? Y/N?	Confirmed? Y/N

_____	_____	_____	M/F
Baptized? Y/N Catholic? Y/N	Penance? Y/N?	First Eucharist? Y/N?	Confirmed? Y/N