

(Please Print)

Family Surname \_\_\_\_\_



# PARISH REGISTRATION

## ST. MICHAEL THE ARCHANGEL ROMAN CATHOLIC CHURCH

824 Pershing Dr.  
Silver Spring, MD 20910  
301.589.1155 Fax 301.589.3470

For Church Use Only

Computer \_\_\_ Letter \_\_\_  
OSV \_\_\_ Wel. Pkt. \_\_\_  
Labels \_\_\_\_\_

Mailing Address:

Mr. & Mrs./ Ms, etc. \_\_\_\_\_ First Name \_\_\_\_\_ Initial \_\_\_\_\_ Last Name \_\_\_\_\_ Date \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_  
Telephone: (Home) \_\_\_\_\_ (Office) \_\_\_\_\_ (Spouse's Office) \_\_\_\_\_ E-mail \_\_\_\_\_  
(Name) \_\_\_\_\_ (Name) \_\_\_\_\_

Do not publish phone number

We have needs regarding Baptism, First Communion, First Reconciliation, Confirmation or Marriage (Please Circle)

Language spoken at home, if other than English \_\_\_\_\_

We would like a priest to call

List only those living with you (Include last name, if different)	Sex	DOB	Race +	Catholic Yes/No	Baptized Yes/No	Confirmed Yes/No	1 <sup>st</sup> Communion Yes/No	Marital Status*	Grade Level (Child)	Attend Mass Regularly Yes/No	Occupation/ Name of School
Head of Household:											
Spouse:											
Children:											
<b>Others living with you</b>	<b>How related</b>										

\*N – Never Married

S – Separated

+ For Archdiocesan Information:

AA – African-American

C – Caribbean

M – Now Married

D – Divorced

AF – African

W – White or European Descent

R – Remarried

W – Widowed

AS – Asian or Asian-American

O – Other \_\_\_\_\_

H - Hispanic or Hispanic-American