

# SACRED HEART CATHOLIC CHURCH

1301 Cooper Ave Turlock, CA 95380

## Registration Form



Phone (209) 634.8578

Fax (209) 634.7124

sacredheartturlock@gmail.com

shparish.net

Your Name: \_\_\_\_\_ First, Middle, Last

Spouses Name: \_\_\_\_\_ First, Middle, Last

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Spouses Cell: \_\_\_\_\_

If cell phone only can this number be put in future telephone directories: Y or N

Your Email Address: \_\_\_\_\_

Spouses Email Address: \_\_\_\_\_

Your Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_ Bus. Phone: \_\_\_\_\_

Spouses Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_ Bus. Phone: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Remarried

Church of Marriage: \_\_\_\_\_ Date: \_\_\_\_\_

Church attended before Sacred Heart Church: \_\_\_\_\_

| Please Print Full Names                | Birthdate | M/F | Grade | <u>Baptism</u><br>Date and name of Church: | <u>First Eucharist</u><br>Date and name of Church: | <u>Confirmation</u><br>Date and name of Church: |
|--|-----------|-----|-------|--|--|---|
| Your Name                              |           |     |       |  |  |   |
| Spouse Name                            |           |     |       |  |  |   |
| Children *(who are still in household) |           |     |       |  |  |   |
|  |           |     |       |  |  |   |
|  |           |     |       |  |  |   |
|  |           |     |       |  |  |   |

Other adults living in household? Yes No. If yes, please indicate below:

\_\_\_\_\_

Full Name                                      Relationship                                      Date of Birth                                      Faith