Our Lady of the Lakes Catholic Church
Registration Form

Is anyone in your home interested in receiving a Sacrament? Yes___ No___
Is anyone in your home, homebound? Yes___ No___
Is anyone in your home interested in serving in a ministry? Yes___ No___
Do you have children that need to be enrolled in Religious Education classes?
Yes___ No___

Family Street Address:_____

_____
City / Zip

Phone Number: _____ (Home, Cell, Work)

Family E-mail address:_____

Do you want parish envelopes: Yes / No

Members	Last Name	First Name	Middle Name	Date of Birth	Baptism Yes/No	1st Holy Communion Yes/No	Confirmation Yes/No	Married Yes/No	Married by a Catholic Priest? Yes/No	Is this person a child?	Name of School Attending	Grade
#1												
#2												
#3												
#4												
#5												
#6												
#7												