Parish Household Registration Form

Please complete both sides and print clearly. Thank you!

Is this a ☐ **new registration** **or a** ☐ **change of information** **Today's Date:** _____

Parish Connection: ☐ **I am a Baptized Catholic and I am choosing this to be my home parish.**

☐ **I am a Baptized Catholic with a different home parish, but plan to be a visitor here.**

☐ **I am not a Baptized Catholic, but I plan to be a part of this parish community.**

Which Parish will you attend or visit most often?

☐ Saint Francis Xavier, **Sallisaw**

☐ Saint John the Evangelist, **Cookson Hills**

☐ Saint Joseph, **Webbers Falls**

☐ Saint Kateri Tekawitha, **Roland/Muldrow**

YOUR Full Name (incl. Jr. MD, RN, etc.) _____

Your Preferred Name or Nickname: _____ **DOB:** ____/____/____

Street Address: _____ **PO Box (If used):** _____

City: _____ **State:** _____ **Zip:** _____

Preferred Phone Number: (_____ **)** _____

May we text you with occasional important updates? We use text messaging for parish notices, weather cancellations, and group reminders (including Religious Education). Message frequency varies, and message/data rates may apply. You may opt out anytime by replying STOP or by contacting the church office. **Your number will not be shared or used for marketing.** ☐ **I grant permission to contact this cell phone number for text messages.**

Can we send you a box of Collection Envelopes? ☐ **Yes** ☐ **No**

Your Email Address: _____

☐ **Catholic Marriage** ☐ **Married** ☐ **Single** ☐ **Divorced** ☐ **Widowed** **Date Married:** _____

SPOUSE'S Full Name (including Jr. MD, RN, etc.) _____

SPOUSE'S Preferred Name or Nickname: _____ **DOB:** ____/____/____

Preferred Phone Number: (_____ **)** _____

☐ **I/we grant permission to contact this cell phone number for text messages.**

SPOUSE'S Email Address: _____

Sacramental Information (dates may be approximate)

Are you Catholic? ☐ **YES** ☐ **NO** **If No, religion/tradition?** _____

Your **Baptism** Date: ____/____/____ Your **Confirmation**: ____/____/____

Your 1st **Communion**: ____/____/____ **Which church might have your Baptismal Records?** _____

Spouse Catholic? ☐ **YES** ☐ **NO** **If No, religion/tradition?** _____

Spouse's **Baptism** Date: ____/____/____ Spouse's **Confirmation**: ____/____/____

Spouse's 1st **Communion**: ____/____/____ **Which church might have your Spouse's Baptismal Records?** _____

You or Spouse's Birth/Maiden Name: _____

*We ask this since sacramental records are kept under people's **birth/maiden names** at their **baptismal parish**.*

Children (minor or adult children you wish included)

	Name	M/F	Age	Birthday	Grade
1.					
2.					
3.					
4.					
5.					

Emergency Contacts & Pastoral Notes. Use this space for emergency contacts, family details, medical or mobility concerns, homebound status, prayer requests, or anything else you would like the parish to know about you! **Welcome to the family!**