

**ST MARY'S PARISH, NORTHCOTE
PARISH RECORDS**

Please fill in one form per family. Please include all members of the family, Catholic and non-Catholic. All details are treated in the strictest confidence and are used for parish record purposes only. Please print

SURNAME or FAMILY NAME: _____

HOME ADDRESS: _____

MAILING ADDRESS (IF DIFFERENT FROM ABOVE) _____

PHONE NUMBER: _____ (listed/unlisted) **E-MAIL:** (IF APPLICABLE) _____

NUMBER IN FAMILY: _____ **INVOLVED IN PLANNED GIVING?** YES/NO. If no, more information? YES/NO

INDIVIDUAL DETAILS OF HOUSEHOLD MEMBERS:

NOTE: MARITAL STATUS CODES:

M:MARRIED S:SINGLE D:DIVORCED W:WIDOWED SP: SINGLE PARENT L:LIVING TOGETHER

<u>1</u>	
FIRST NAME: _____	SECOND NAME: _____
PREFERRED NAME _____	MAIDEN NAME: _____ (IF APPLICABLE)
DATE OF BIRTH: ____/____/____ (day/month/year)	RELIGION: _____
(CIRCLE APPROPRIATE ANSWER) SEX: MALE/FEMALE	MARITAL STATUS: M S D W SP L
SACRAMENTS RECEIVED: BAPTISM CONFIRMATION HOLY EUCHARIST MARRIAGE	
ETHNIC ORIGIN: _____	LANGUAGE/S SPOKEN: _____
OCCUPATION: _____	
STUDENT? NAME SCHOOL /TERTIARY INSTITUTION/YEAR: _____	
CHURCH INVOLVEMENT: _____	
ANY SPECIAL NEEDS? _____	

<u>2</u>	
FIRST NAME: _____	SECOND NAME: _____
PREFERRED NAME _____	MAIDEN NAME: _____ (IF APPLICABLE)
DATE OF BIRTH: ____/____/____ (day/month/year)	RELIGION: _____
(CIRCLE APPROPRIATE ANSWER) SEX: MALE/FEMALE	MARITAL STATUS: M S D W SP L
SACRAMENTS RECEIVED: BAPTISM CONFIRMATION HOLY EUCHARIST MARRIAGE	
ETHNIC GROUP: _____	LANGUAGE/S SPOKEN: _____
OCCUPATION: _____	
IF STUDENT, NAME OF SCHOOL /TERTIARY INSTITUTION AND YEAR _____	
CHURCH INVOLVEMENT: _____	
ANY SPECIAL NEEDS? _____	

3

FIRST NAME: _____ **SECOND NAME:** _____

PREFERRED NAME _____ **MAIDEN NAME:** _____
(IF APPLICABLE)

DATE OF BIRTH: ____/____/____ (day/month/year) **RELIGION:** _____

(CIRCLE APPROPRIATE ANSWER) **SEX:** MALE/FEMALE **MARITAL STATUS:** M S D W SP L

SACRAMENTS RECEIVED: BAPTISM CONFIRMATION HOLY EUCHARIST MARRIAGE

ETHNIC GROUP: _____ **LANGUAGE/S SPOKEN:** _____

OCCUPATION: _____

IF STUDENT, NAME OF SCHOOL /TERTIARY INSTITUTION AND YEAR _____

CHURCH INVOLVEMENT: _____

ANY SPECIAL NEEDS? _____

4

FIRST NAME: _____ **SECOND NAME:** _____

PREFERRED NAME _____ **MAIDEN NAME:** _____
(IF APPLICABLE)

DATE OF BIRTH: ____/____/____ (day/month/year) **RELIGION:** _____

(CIRCLE APPROPRIATE ANSWER) **SEX:** MALE/FEMALE **MARITAL STATUS:** M S D W SP L

SACRAMENTS RECEIVED: BAPTISM CONFIRMATION HOLY EUCHARIST MARRIAGE

ETHNIC GROUP: _____ **LANGUAGE/S SPOKEN:** _____

OCCUPATION: _____

IF STUDENT, NAME OF SCHOOL /TERTIARY INSTITUTION AND YEAR _____

CHURCH INVOLVEMENT: _____

ANY SPECIAL NEEDS? _____

5

FIRST NAME: _____ **SECOND NAME:** _____

PREFERRED NAME _____ **MAIDEN NAME:** _____
(IF APPLICABLE)

DATE OF BIRTH: ____/____/____ (day/month/year) **RELIGION:** _____

(CIRCLE APPROPRIATE ANSWER) **SEX:** MALE/FEMALE **MARITAL STATUS:** M S D W SP L

SACRAMENTS RECEIVED: BAPTISM CONFIRMATION HOLY EUCHARIST MARRIAGE

ETHNIC GROUP: _____ **LANGUAGE/S:** _____

OCCUPATION: _____

IF STUDENT, NAME OF SCHOOL /TERTIARY INSTITUTION AND YEAR _____

CHURCH INVOLVEMENT: _____

ANY SPECIAL NEEDS? _____