

Welcome to Our Lady of Guadalupe Parish

REGISTRATION FORM

(This information will remain confidential).

To help us have a complete record of our Parish membership, please fill out this form and return it to the parish Office. Thank you.



Mission Statement:

*A diverse ethnic community rooted in faith, guided by
Our Lady of Guadalupe to know and love God better,
serving and evangelizing with joy.*

Interested in joining a Parish Ministry:

(Please mark all that you might want to join)

- | | |
|----------------------|---------------------|
| Altar Server | Guadalupano Society |
| Bible Study | Knights of Columbus |
| Catechist | Lector |
| Cenacle | Respect Life |
| Choir | St. Vincent de Paul |
| Divine Mercy | Usher |
| Eucharistic Minister | Vietnamese Group |
| Filipino Group | Youth Group |

Sharing your Talents:

(Please mark any you might be able to help the Parish with)

- | | |
|-------------|------------------|
| Carpentry | Gardening |
| Cleaning | Office Volunteer |
| Data Entry | Painting |
| Electrician | Plumbing |
| Fundraising | Sewing |



REGISTRATION INFORMATION

Would you like to receive offering envelopes? Yes No Today's Date: _____

Name must be Legal Name

Family Last Name: _____ Home Telephone: _____

First Name (HoH): _____ HoH Mobile Number:: _____ HoH Religion: _____

First Name (Spouse): _____ Spouse Mobile Number :: _____ Spouse Religion: _____

Address: _____ Apt# _____ City _____, CA Zip Code _____

HoH E-mail Address: _____ Spouse E-mail Address: _____

HoH Occupation: _____ HoH Work Telephone: _____

Spouse Occupation: _____ Spouse Work Telephone: _____

Primary Language: English __ Spanish __ Tagalog __ Vietnamese __ Other __ _____ (Please provide other) (Please provide other below)

Language(s) spoken at home (Other than Primary): English __ Spanish __ Tagalog __ Vietnamese __ Chinese __ Indian __ Other __ _____

First and Last Name Adults	Birth Date MM/DD/YY	Baptized Catholic	First Communion	Con- firmed	Married	Catholic Marriage (Parish*)	Education Level
		Yes No	Yes No	Yes No	Yes No	Date	
		Yes No	Yes No	Yes No	Yes No	*	

First and Last Name Children	M/ F	Birth Date MM/DD/YY	Baptized Catholic	First Communion	Confirmed	Current Grade	Current School	Attending Faith Formation?
			Date & Parish*	Date & Parish*	Date & Parish*			
								Yes No
								Yes No
								Yes No
								Yes No
								Yes No

Parish * = Includes Church Name and Address where the Sacrament was celebrated

PLEASE COMPLETE ALL APPLICABLE FIELDS IN FULL