

QUEEN OF APOSTLES PARISH REGISTRATION

Family name				
Address		City	Zip	
Home phone		Email		
Envelopes	Yes	No	Please email online giving link	
Were you registered in one of the closed parishes?			Yes	No
If yes, please indicate parish name	Sacred Heart?	St. Patrick?	St. Paul?	St. Jude?
Queen of Apostles school family?				
Queen of Apostles religious education family?				
Adult information				
First name				
Last name				
Gender	M	F	Date of Birth	
Religion				
Marital status				
Email		Cell phone		
Cell phone				
Sacraments received	Baptism	Reconciliation	Communion	Confirmation
First name				
Last name				
Gender	M	F	Date of Birth	
Religion				
Marital status				
Email		Cell phone		
Sacraments received	Baptism	Reconciliation	Communion	Confirmation

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Children				
First name				
Last name				
Gender	M	F	Date of Birth	
School				
Grade				
Sacraments received	Baptism	Reconciliation	Communion	Confirmation
First name				
Last name				
Gender	M	F	Date of Birth	
School				
Grade				
Sacraments received	Baptism	Reconciliation	Communion	Confirmation
First name				
Last name				
Gender	M	F	Date of Birth	
School				
Grade				
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