

FATHER's Information

MOTHER's Information

First Name: _____

First Name: _____

Preferred Name: _____

Preferred Name: _____

Last Name: _____

Last Name: _____

Address: _____

Address: _____

City, State, Zip: _____

City, State, Zip: _____

Home Phone: _____

Home Phone: _____

Cell Phone: _____

Cell Phone: _____

E-mail Address: _____

E-mail Address: _____

Occupation: _____

Occupation: _____

Employer: _____

Employer: _____

Work Phone: _____

Work Phone: _____

Religion: _____

Religion: _____

Birthplace: _____

Birthplace: _____

(City, State)

(City, State)

Marital Status: _____

Marital Status: _____

Maiden Name: _____

Stepparent's/Guardian's Name (if applicable) _____

Are you a registered parishioner of OLV Parish? YES NO

If yes, list parish envelope number: _____

If no, where do you worship? _____

I agree to have my child(ren) photographed for print/media releases. YES NO

Parent/Guardian Signature _____

| | | |
|----------------------------|--------------------|----------------------|
| <i>For Office Use Only</i> | | |
| Date Received _____ | Initials _____ | Cash Amount \$ _____ |
| Check Amount \$ _____ | Check Number _____ | |