

FAMILY GENERAL INFORMATION

Family Name:

Head of Household:

Last Name: _____

First Name: _____

Title: _____

Suffix: _____

Spouse:

Last Name: _____

First Name: _____

Title: _____

Suffix: _____

Family Contact Info:

Home

Street Address: _____

City: _____

Zip: _____

Phone: _____ Home Cell Work

E-mail Address: _____

Mailing Address (if different)

Street Address: _____

City: _____

Zip: _____

Alternate Address (Winter Home / Vacation Home)

Street Address: _____

City: _____

Zip: _____

Active from: ___/___Month/Day **to:** ___/___Month/Day

Send mail to Alternate address? **Yes** **No**

Alternate Address Remarks: _____

FAMILY MEMBER INDIVIDUAL INFORMATION

(Please print additional copies of Pages 3-5 for each member of your family)

Member Name:

Last Name: _____

First Name: _____

Middle Name: _____

Nickname: _____

Maiden Name: _____

Title: _____

Suffix: _____

Member Info:

Relationship to Head of Household: (Drop down values)

Grade/Degree: (Drop down values)

Marital Status: (Drop down values)

Language spoken: _____

Ethnicity: _____

Religion: _____

Occupation: _____

If Student – Name of School: _____

Phone: _____ Cell Work

E-mail Address: _____

(Please print additional copies of Pages 3-5 for each member of your family)

Member Sacrament Information:

Baptism

Date: __/ __/ __

Church Name: _____

Church Address: (City/State) _____

1st Communion

Date: __/ __/ __

Church Name: _____

Church Address: (City/State) _____

Confirmation

Date: __/ __/ __

Church Name: _____

Church Address: (City/State) _____

Marriage

Date: __/ __/ __

Church Name: _____

Church Address: (City/State) _____

(Please print additional copies of Pages 3-5 for each member of your family)

Member Interests:

I have the following skills to contribute in some way to the community:

I would be interested in participating in the following ministries/organizations at St. Giles:
