



OUR LADY QUEEN OF PEACE CONGREGATION PARISH REGISTRATION FORM

Today's Date: _____

Full Name: _____

First Middle Last

Married Widow/er Divorced Single Engaged Co-Resident

Address: _____ Apt # _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone Home: (____) _____ Cell: (____) _____

Date of Birth: __/__/____ Age: ____

Languages Spoken: English Spanish English & Spanish Tagalog Hmong Vietnamese Other: _____

Ethnicity: Caucasian Hispanic African-American Bi-racial Asian African Other: _____

Occupation: (if retired, previous occupation): _____

Employer Name: _____ Phone (Work): _____

Spouse:

Full Name: _____

First Middle Last

Email: _____ Phone Home: (____) _____ Cell: (____) _____

Date of Birth: __/__/____ Age: ____

Languages Spoken: English Spanish English & Spanish Tagalog Hmong Vietnamese Other: _____

Ethnicity: Caucasian Hispanic African-American Bi-racial Asian African Other: _____

Occupation: (if retired, previous occupation): _____

Employer Name: _____ Phone (Work): _____

List of other family members (including children) who live with you:

No.	FULL NAME			RELATIONSHIP ¹	DATE OF BIRTH	AGE	M	F
	First	Middle	Last-Name					
1								
2								
3								
4								
5								
6								
7								

¹ Son, daughter, brother, sister, mother, father, grandmother, grandfather, uncle, aunt, cousin, room-mate, friend, etc.