



WELCOME TO RESURRECTION!

PARISHIONER REGISTRATION FORM

HOUSEHOLD CONTACT INFORMATION

Household Last Name

Mailing Address

Address 1

Address 2

City

State

Zip Code

Primary Email

Primary Phone

(###)

###

####

Primary Cell Phone

(###)

###

####

What is your current status?

Single Married Separated Divorced Widowed

If married, were you married by a priest?

Yes No

If you have a non-Catholic spouse, do you wish them to appear on the registration record with you?

Yes No

Church of the Resurrection

3201 S. Evergreen Road

Tempe, AZ 85282

(480) 838-0207

www.ResurrectionAZ.org

**ADDITIONAL
INFORMATION OR
NOTES MAY BE
ADDED TO THE BACK
OF THIS FORM**

ADULT INFORMATION

1

Full Name (Include Maiden Name if Applicable)

Birthdate

Religious Affiliation

Occupation

Cell Phone

2

Full Name (Include Maiden Name if Applicable)

Birthdate

Religious Affiliation

Occupation

Cell Phone

3

Full Name (Include Maiden Name if Applicable)

Birthdate

Religious Affiliation

Occupation

Cell Phone

SACRAMENTS THAT HAVE BEEN RECEIVED

- Baptism
 Reconciliation (Confession)
 Confirmation
 First Eucharist (Communion)

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CHILDREN (INFANT TO AGE 18) INFORMATION

1

Full Name

Birthdate

Religious Affiliation

Gender

School

Grade

2

Full Name

Birthdate

Religious Affiliation

Gender

School

Grade

3

Full Name

Birthdate

Religious Affiliation

Gender

School

Grade

4

Full Name

Birthdate

Religious Affiliation

Gender

School

Grade

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