

Registration Form

Our Lady of Lourdes Catholic Parish
4723 NW Franklin Street, Vancouver, WA 98663
360-695-1366



FAMILY NAME		
ADDRESS		
CITY	STATE	ZIP
HOME TELEPHONE	CELL PHONE	EMAIL

Pastoral Needs

Please place a checkmark by any of the following if you would like to speak with a priest or a pastoral staff member.

- | | | |
|--|--|--|
| <input type="checkbox"/> Baptism | <input type="checkbox"/> Marriage Preparation | <input type="checkbox"/> Marriage Case |
| <input type="checkbox"/> First Communion | <input type="checkbox"/> RCIA | <input type="checkbox"/> Anointing of the Sick |
| <input type="checkbox"/> Confirmation | <input type="checkbox"/> Returning to the Church | <input type="checkbox"/> Pastoral Care/Communion at Home |
| <input type="checkbox"/> Faith Formation | | |

For Office Use Only	<input type="checkbox"/> Pastoral	<input type="checkbox"/> Archdiocese
	<input type="checkbox"/> Committees	<input type="checkbox"/> Letter to Parishioner
	<input type="checkbox"/> PDS	<input type="checkbox"/> Welcome Call/Visit

Family Information

	Adult	Adult	Child #1	Child #2	Child #3
First Name					
Last Name					
Marital Status					
Religion					
Language					
Occupation					
Place of Work/School					
Male/Female					
Birthdate					
Baptism Date					
1 st Penance					
1 st Communion					
Confirmation Date					

Catholic Church Marriage? Y N Date:
 Divorce? Y N Date:
 Annulment? Y N Date: