



Holy Redeemer Parish

REGISTRATION FORM
2700 Baldwin Street, Jenison, MI 49428
(616) 669-9220

ACS	OFFICE USE
WP	CSA
IS	CL
	E-LIST
ENVELOPE NUMBER	

PLEASE RETURN THIS FORM TO THE PARISH OFFICE

Date: _____

Family Name: _____ Title: Dr., Mr., (&) Mrs., Dr., Miss, Ms.

Home Phone: _____ Address: _____ Apt. #: _____

City, State, Zip: _____

College Student: Yes College Attending: _____ Year of Completion: _____

Previous Parish: _____ Emergency Contact Person: _____

Relationship: _____ Phone Number: _____

Marital Status: Married / Remarried / Single / Widowed / Separated / Divorced

Date: _____ Place / Church: _____

Head of Household (Full Name): _____ Goes by Name: _____

DOB: ____/____/____ Gender: Male / Female Maiden Name: _____

Religion: (if other than Catholic) _____ Ethnicity: White / Asian / Black / Hispanic / Other: _____

Baptized: yes / no Date: ____/____/____ Church: _____

Confirmed: yes / no Date: ____/____/____ Church: _____

Occupation: _____ Place of Employment: _____

Work Phone: _____ Cell Phone: _____

List any special needs for member here: _____ Email: _____

Adult Member (Full Name): _____ Goes by Name: _____

DOB: ____/____/____ Gender: Male / Female Maiden Name: _____

Religion: (if other than Catholic) _____ Ethnicity: White / Asian / Black / Hispanic / Other: _____

Baptized: yes / no Date: ____/____/____ Church: _____

Confirmed: yes / no Date: ____/____/____ Church: _____

Occupation: _____ Place of Employment: _____

Work Phone: _____ Cell Phone: _____

List any special needs for member here: _____ Email: _____

Persons Under 18 (Oldest to Youngest) Full Name & (Last Name if different)

Full Name: _____ Goes by Name: _____
DOB: ____/____/____ Gender: Male / Female
Religion: (if other than Catholic) _____ Ethnicity: White / Asian / Black / Hispanic / Other
Baptized: yes / no Date ____/____/____ Church _____
1st Communion: yes / no Date ____/____/____ Church _____
Confirmed: yes / no Date ____/____/____ Church _____
School Attending: _____ Current Grade: _____
List any special needs for child here: _____

Full Name: _____ Goes by Name: _____
DOB: ____/____/____ Gender: Male / Female
Religion: (if other than Catholic) _____ Ethnicity: White / Asian / Black / Hispanic / Other
Baptized: yes / no Date ____/____/____ Church _____
1st Communion: yes / no Date ____/____/____ Church _____
Confirmed: yes / no Date ____/____/____ Church _____
School Attending: _____ Current Grade: _____
List any special needs for child here: _____

Full Name: _____ Goes by Name: _____
DOB: ____/____/____ Gender: Male / Female
Religion: (if other than Catholic) _____ Ethnicity: White / Asian / Black / Hispanic / Other
Baptized: yes / no Date ____/____/____ Church _____
1st Communion: yes / no Date ____/____/____ Church _____
Confirmed: yes / no Date ____/____/____ Church _____
School Attending: _____ Current Grade: _____
List any special needs for child here: _____

Full Name: _____ Goes by Name: _____
DOB: ____/____/____ Gender: Male / Female
Religion: (if other than Catholic) _____ Ethnicity: White / Asian / Black / Hispanic / Other
Baptized: yes / no Date ____/____/____ Church _____
1st Communion: yes / no Date ____/____/____ Church _____
Confirmed: yes / no Date ____/____/____ Church _____
School Attending: _____ Current Grade: _____
List any special needs for child here: _____