

Holy Cross Melkite Catholic Church Registration Form

451 West Madison Avenue / Placentia, CA / 92870-4537

(714) 985-1710

www.HolyCrossMelkite.org - office@holycrossmelkite.org

Date filled out:			
Dates updated:			
Envelope number:			

Husband's name:	
Date of birth:	
Place of birth:	
Religion of husband: (ie. Melkite Catholic, Antiochian Orthodox, Syrian Catholic/Orthodox, Maronite Catholic, Armenian Catholic/Orthodox, Roman Catholic, Coptic Catholic/Orthodox, etc.)	
Date of Baptism:	
Church and place of Baptism:	
Date of Chrismation (Confirmation):	
Place of Chrismation (Confirmation):	
Occupation:	
If deceased, date:	
Parents' name:	

Wife's name (with maiden name):	
Date of birth:	
Place of birth:	
Religion of wife: (ie. Melkite Catholic, Antiochian Orthodox, Syrian Catholic/Orthodox, Maronite Catholic, Armenian Catholic/Orthodox, Roman Catholic, Coptic Catholic/Orthodox, etc.)	
Date of Baptism:	
Church and place of Baptism:	
Date of Chrismation (Confirmation):	
Place of Chrismation (Confirmation):	
Occupation:	
If deceased, date:	
Parents' name:	

Family Contact Information:		
Home address:	Street:	
	City & State:	
	Zip Code:	
Home phone:		
Husband's cellular phone:		
Husband's email:		
Other:		

Wife's cellular phone:	
Wife's email:	
Other:	

Date of Marriage?		
Church or place of Marriage?		
Address:	Street:	
	City & State:	
	Zip Code:	
	Phone:	

Would you like to receive a set of annual donation envelopes?

Are there special talents or skills you have which you feel can contribute to the parish?

Are you interested in volunteer opportunities?

Do you have volunteer experience?

Are there special projects, activities, or ministries that you would like to be involved with, such as Vacation Bible Camp, Marriage Preparation Team, Choir, Sunday School, or Parish Festival?

Child's name:	
Male / Female:	
Date of birth:	
Place of birth:	
Date of Baptism:	
Church and place of Baptism:	
Date of Chrismation (Confirmation):	
Church and place of Chrismation (Confirmation):	
Date of Marriage:	
Place of Marriage:	
Cellular phone (if over 18):	
E-mail (if over 18):	
Occupation:	
If deceased, date:	

Child's name:	
Male / Female:	
Date of birth:	
Place of birth:	
Date of Baptism:	
Church and place of Baptism:	
Date of Chrismation (Confirmation):	
Church and place of Chrismation (Confirmation):	
Date of Marriage:	
Place of Marriage:	

Cellular phone (if over 18):	
E-mail (if over 18):	
Occupation:	
If deceased, date:	

Child's name:	
Male / Female:	
Date of birth:	
Place of birth:	
Date of Baptism:	
Church and place of Baptism:	
Date of Chrismation (Confirmation):	
Church and place of Chrismation (Confirmation):	
Date of Marriage:	
Place of Marriage:	
Cellular phone (if over 18):	
E-mail (if over 18):	
Occupation:	
If deceased, date:	

Child's name:	
Male / Female:	
Date of birth:	
Place of birth:	
Date of Baptism:	
Church and place of Baptism:	
Date of Chrismation (Confirmation):	
Church and place of Chrismation (Confirmation):	
Date of Marriage:	
Place of Marriage:	
Cellular phone (if over 18):	
E-mail (if over 18):	
Occupation:	
If deceased, date:	

Related to:

Notes: