

Office Use Only

Date: ___/___/___

Envelope #: _____

Area #: _____

SACRED HEART PARISH

Sacred Heart Church, 200 So. 5th St & St. Mary's Church, 2300 Madison Ave.



***Registering for: *Parish: ___ *Parish & NC School: ___ *as a NC School Family Only: ___ Parish & Fam Form:___**

Title (Circle One): Mr. / Mrs. Mr. Mrs. Miss Ms. Dr. Dr. / Mrs. Dr. / Mr. Dr. / Dr.

Last: _____ **First:** _____ **Spouse:** _____

Street Address: _____ **Mailing Address:** _____ **City/State:** _____ **Zip:** _____

Family Phone : _____ **Cell: (His)** _____ **(Hers)** _____ **E-Mail:** _____

Marital Status: (Circle One): Married In the Catholic Church Civil Marriage Single Divorced Separated Widowed

Marriage Date: ___/___/___ **Location: Church/City/State:** _____

Were you or your spouse involved in ministries / committees / activities at former parish? Please list activity and person involved:

Are you interested in more information on Norfolk Catholic Schools? (Circle one) Yes No

Please Print Clearly	HEAD OF HOUSEHOLD	SPOUSE		CHILD	CHILD	CHILD	CHILD
Last Name							
First & Middle							
Birthday	/ /	/ /		/ /	/ /	/ /	/ /
Religion							
Handicap							
Language Spoken							
Job Title/Occupation			Child lives with >	Mother Father Both	Mother Father Both	Mother Father Both	Mother Father Both
Name of Business You Work At			Name of School Attending >				
Work location - City/State			Grade Level >				
Business Phone #							
Sex (Circle One)	Male Female	Male Female		Male Female	Male Female	Male Female	Male Female
Baptism Church City/State	Yes No _____	Yes No _____		Yes No _____	Yes No _____	Yes No _____	Yes No _____
1st Reconciliation	Yes No	Yes No		Yes No	Yes No	Yes No	Yes No
1st Communion Church City/State	Yes No _____	Yes No _____		Yes No _____	Yes No _____	Yes No _____	Yes No _____
Confirmation Church City/State	Yes No _____	Yes No _____		Yes No _____	Yes No _____	Yes No _____	Yes No _____