

Visitation of Our Lady Parish Registration Form

Online version of this form available at vol.org

Date Completed _____

Last Name (Head of Household)	First Name (Head of Household)	Spouse First Name	Married by Priest or Civily? (circle one)	Date of Marriage
			Priest Civil	

Street Address	City/State/Zip	Mailing Address (if different)	Home Phone	Unlisted (Y/N)

Existing Parishioner? (Y/N)	Currently use envelopes? (Y/N)	If yes, list envelope #	If NO, would you like envelopes? (Y/N)

OFFICE USE ONLY
Envelopes distributed on: _____ Envelope # _____

	Spouse	Child 1	Child 2	Child 3	Child 4
First name					
Last Name & Suffix					
Sex (M/F)					
Date of Birth					
Religion					
Cell Phone#					
E-mail Address					
Would you like to receive emails, texts, or both on important VOL information?	(Circle one) e-mails texts both none				

Please tell us if you need help or have questions in any of the following areas: (circle all that apply)

Baptism	First Penance	Communion	Confirmation	Marriage	Annulment	Holy Orders
Confession	Anointing of the sick	Eucharistic Adoration	Lector	Altar Server	Eucharistic Minister	RCIA
Other: (list)						
Comments:						