

OFFICE USE ONLY PARISH ID # \_\_\_\_\_

PDS Input Date: \_\_\_\_\_

# St. Louis de Montfort Parish

Central Office 860-567-5209 ☙ Fiscal Office 860-491-2756

## REGISTRATION/CENSUS 2024

Which church do you worship at regularly within the parish:

☐

St. Anthony of Padua Church  
49 SOUTH STREET  
LITCHFIELD, CT 067959

☐

Our Lady of Grace Church  
715 BANTAM ROAD  
BANTAM, CT 06750-0427

☐

St. Thomas of Villanova Church  
71 NORTH STREET  
GOSHEN, CT 06756-0177

Today's Date: \_\_\_\_\_ Family Last Name: \_\_\_\_\_

Address: \_\_\_\_\_  
No. Street (P.O. Box & Street No.) City State Zip Code

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Do you wish to use Pre-Printed Offertory Envelopes: ☐ Yes ☐ No ☐ Seasonal *See #6 on back page* ☐ Year Round

### FAMILY INFORMATION:

**1** Name/Head of Household: \_\_\_\_\_ DOB: \_\_\_\_\_ Religion: \_\_\_\_\_

✓ Sacraments received: \_\_\_\_\_ Baptism \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation \_\_\_\_\_ Marriage

Marital Status: \_\_\_\_\_ Date: \_\_\_\_\_ Is Marriage recognized by Catholic Church ☐ Yes ☐ No

Church of Marriage: \_\_\_\_\_ Town, State \_\_\_\_\_

**2** Spouse's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Religion: \_\_\_\_\_

✓ Sacraments received: \_\_\_\_\_ Baptism \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation \_\_\_\_\_ Marriage

**3** Children Under 18 (Living at home): Will they be registering for Religious Education Classes: ☐ Yes ☐ No

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Religion: \_\_\_\_\_ Grade in School: \_\_\_\_\_

✓ Sacraments received: \_\_\_\_\_ Baptism \_\_\_\_\_ Date: \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation

Church of Baptism: \_\_\_\_\_ (We will need copy of Baptismal Certificate)

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Religion: \_\_\_\_\_ Grade in School: \_\_\_\_\_

✓ Sacraments received: \_\_\_\_\_ Baptism \_\_\_\_\_ Date: \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation

Church of Baptism: \_\_\_\_\_ (We will need copy of Baptismal Certificate)

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Religion: \_\_\_\_\_ Grade in School: \_\_\_\_\_

✓ Sacraments received: \_\_\_\_\_ Baptism \_\_\_\_\_ Date: \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation

Church of Baptism: \_\_\_\_\_ (We will need copy of Baptismal Certificate)

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Religion: \_\_\_\_\_ Grade in School: \_\_\_\_\_

✓ Sacraments received: \_\_\_\_\_ Baptism \_\_\_\_\_ Date: \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation

Church of Baptism: \_\_\_\_\_ (We will need copy of Baptismal Certificate)

(if more children please continue on the back under children living home over age 18)

## FAMILY INFORMATION cont.:

### 4 Children OVER 18 (Living at home):

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Religion: \_\_\_\_\_

✓ Sacraments received: \_\_\_\_\_ Baptism Date: \_\_\_\_\_ \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Religion: \_\_\_\_\_

✓ Sacraments received: \_\_\_\_\_ Baptism Date: \_\_\_\_\_ \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Religion: \_\_\_\_\_

✓ Sacraments received: \_\_\_\_\_ Baptism Date: \_\_\_\_\_ \_\_\_\_\_ First Communion \_\_\_\_\_ Confirmation

### 5 OTHER Catholic Relatives Living with you in your home: ☐ Yes ☐ No

If YES, Please List Name and Relationship to you: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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## OTHER INFORMATION:

### 6 Seasonal Parishioner: Please list approximate dates here, as well as, alternate address:

\_\_\_\_\_

\_\_\_\_\_

### 7 Previous Affiliations: Please list any other Catholic Churches you were previously Registered with and their location

\_\_\_\_\_

\_\_\_\_\_

### 8 Would you be Interested in learning more about the forms of service within our parish?: ☐ Yes ☐ No

### 9 Do you have any Interesting talents or hobbies: ☐ Yes ☐ No

If YES, Please list: \_\_\_\_\_

\_\_\_\_\_

### 10 ANYTHING that Father should know about in your household: ☐ Yes ☐ No

(Homebound, Handicapped, Language Barrier, Divorced, Separated, Non-Practicing, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_