

**ALL SAINTS CATHOLIC COMMUNITY** - 5231 MEADOWCREEK DRIVE AT ARAPAHO; DALLAS, TX 75248 (972-661-9282)  
**Parish Registration Form** (please put any additional information on reverse side)

LAST NAME \_\_\_\_\_ Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Home Phone \_\_\_\_\_ (unlisted?  Yes  No) Email Address \_\_\_\_\_  
 Previous Parish \_\_\_\_\_ Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Do you wish to be listed in the  
 Parish Directory?  YES  NO

date

**ADULTS IN THE HOUSEHOLD TO BE REGISTERED** (please indicate title, i.e., Mr. Mrs. Ms. Miss, Dr. etc.)

Title	First Name & Middle Initial <i>(indicate if different last name)</i>	Ethnic Background	Date of Birth	Sex M/F	Marital Status**	Religion	Sacraments rec'd				Employed by	Position	Work Phone	Primary Language
							Y or N							
							B	R	E	C***				

mapsco

**CHILDREN UNDER 19**

Full Name <i>(indicate if different last name from what is listed above)</i>	Ethnic Background	Date of Birth	Sex M/F	Religion	Sacraments rec'd				School Attending	Grade Level	Primary Language
					Y or N						
					B	R	E	C***			

**DEPENDENT ADULTS OVER 19 LIVING IN HOUSEHOLD OR IN COLLEGE**

Full Name <i>(indicate if different last name from what is listed above)</i>	Ethnic Background	Date of Birth	Sex M/F	Religion	Sacraments rec'd				Relationship	College / Employed by	Primary Language
					Y or N						
					B	R	E	C***			

\*\* **Marital Status:** M=Married D=Divorced SEP=Separated W=Widowed

\*\*\* **Sacraments:** B=Baptism R=First Reconciliation/Confession E= First Eucharist/Communion C=Confirmation

Special Needs? Disabled?	Ministry Interests?	Volunteer Interests?
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FOR OFFICE USE ONLY  
h/h/name