

# PARISHIONER REGISTRATION FORM

**Catholic Communities of L'Arbre Croche**  
 (Circle one) **Holy Childhood of Jesus - St. Ignatius - Holy Cross - St. Nicholas**  
 150 West Main Street, Harbor Springs MI 49740  
**phone:** 231-526-2017 **e-mail:** secretary@cclcparishes.org  
*Please fill out the form below and return it to the church office.*

<b>For Office Use Only</b>
PDS Number _____
Registration Date _____
Notes: _____

FAMILY LAST NAME: _____
STREET ADDRESS: _____
CITY, STATE, ZIP: _____
HOME PHONE: _____ - _____ - _____
CELL PHONE _____ - _____ - _____

Are you currently registered at another parish?
Yes                      No
If yes, which one? _____

<b>Head of Household #1</b>
Name _____
Birth Date _____ Male          Female
Religion _____ Maiden Name _____
Marital Status: Married    Single    Div./Sep    Widowed
Married By: _____ Catholic Church    Other
Wedding Date _____ (Sacramental date)
Occupation _____ Employer _____
Work Phone _____ - _____ - _____ Cell Phone _____ - _____ - _____
Email Address _____

<b>Head of Household #2</b>
Name _____
Birth Date _____ Male          Female
Religion _____ Maiden Name _____
Marital Status: Married    Single    Div./Sep    Widowed
Married By: _____ Catholic Church    Other
Wedding Date _____ (Sacramental date)
Occupation _____ Employer _____
Work Phone _____ - _____ - _____ Cell Phone _____ - _____ - _____
Email Address _____

Homebound / Disabled in the home? List Name (s) \_\_\_\_\_

Names of Children UNDER 18	M/F	Birth Date	School Grade	Baptism	Reconciliation	First Communion	Confirmation

<p><b>Please indicate which option you choose for your contribution to the parish.</b></p> <p><b><i>Weekly Offertory</i></b></p> <p>Weekly Offering (52 Sunday Envelopes)</p> <p>Electronic Giving at <a href="http://www.cclcparishes.org">www.cclcparishes.org</a></p> <p>Contact me with questions about giving</p>
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*Other adults over 18 in home should fill out separate forms.*