



Registration Date: ___/___/___

Our Lady of Perpetual Help Church
5830 Williams Drive
Corpus Christi, TX 78412

Primary/Family email address _____ Today's Date ___/___/___

Home Address _____

City _____ State _____ Zip _____

Mailing Address _____

City _____ State _____ Zip _____

Home/Primary Phone _____ Preferred mailing language English Spanish

Publish Phone Publish Address Publish Email Provide Contribuon E nvelopes

Head of Household _____

Title: Mr. Mrs. Ms. Miss Dr.

Last Name _____ First _____ Middle _____

Nick Name _____ Suffix: Sr. Jr. II III IV Gender: M F

Date of Birth ___/___/___ e-mail _____

City, State of Birth _____

Religion _____ Anniversary ___/___/___ Marital Status: Sing Mar Wid Div

Cell phone _____ Work phone _____

Mark the Sacraments received: none received

Baptized 1st Communion 1st Confession Confirmation Sacrament of Matrimony

Spouse / Other Adult _____

Title: Mr. Mrs. Ms. Miss Dr.

Last Name _____ First _____ Middle _____

Nick Name _____ Suffix: Sr. Jr. II III IV Gender: M F

Date of Birth ___/___/___ e-mail _____

City, State of Birth _____

Religion _____ Anniversary ___/___/___ Marital Status: Sing Mar Wid Div

Cell phone _____ Work phone _____

Mark the Sacraments received: none received

Baptized 1st Communion 1st Confession Confirmation Sacrament of Matrimony

Please complete the other side for dependents

Dependent

Last Name _____ First _____ Middle _____

Nick Name _____ Suffix: Sr. Jr. II III IV Gender: M F

Date of Birth / / City, State of Birth _____

Religion _____

Birth Father's Name _____ Birth Mother's Maiden Name _____

Mark the Sacraments received: none received

Baptized 1st Communion 1st Confession Confirmation

Dependent

Last Name _____ First _____ Middle _____

Nick Name _____ Suffix: Sr. Jr. II III IV Gender: M F

Date of Birth / / City, State of Birth _____

Religion _____

Birth Father's Name _____ Birth Mother's Maiden Name _____

Mark the Sacraments received: none received

Baptized 1st Communion 1st Confession Confirmation

Dependent

Last Name _____ First _____ Middle _____

Nick Name _____ Suffix: Sr. Jr. II III IV Gender: M F

Date of Birth / / City, State of Birth _____

Religion _____

Birth Father's Name _____ Birth Mother's Maiden Name _____

Mark the Sacraments received: none received

Baptized 1st Communion 1st Confession Confirmation

Dependent

Last Name _____ First _____ Middle _____

Nick Name _____ Suffix: Sr. Jr. II III IV Gender: M F

Date of Birth / / City, State of Birth _____

Religion _____

Birth Father's Name _____ Birth Mother's Maiden Name _____

Mark the Sacraments received: none received

Baptized 1st Communion 1st Confession Confirmation