

## 307 Congress St. Portland, Maine 04101 207-773-7746 Fax: 207-879-5547

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Welcome to the Portland Peninsula & Island Parishes! In order that we may include you and your family in various parish activities and to ensure accurate parish records, we ask you to please complete this registration form. When complete, please return to the Pastoral Center Office (Monday through Friday, 9AM to 4:30 PM), mail it, or simply place it in the collection basket during Mass. Thank you and God bless you!

			Heart / St. Dominic, St. Louis, or
Address (street/city	/zip)		
e-mail:			
		Best time to ca	
Birth date:	Male/Female	Maiden Name (if applicab	le)
Single Ma	rried: Annivers	sary Separated	Divorced Widowed
Profession, Occupa	tion, Trade or Skill		
Sacramental Infor	mation (Please place an	"X" next to all Sacraments	Received)
Baptism	Confirmation	First Communion	Marriage
SPOUSE(if applic	able)		
First Name: Last Name: Last Name:			Jame:
E-mail address:			
	ork phone:Best time to call:		
Birth Date:	Date: Religion, if not Catholic:		
Male/Female:	Maide	en Name (if applicable):	
Profession, Occupa	tion, Trade or Skill:		(Over)

## SPOUSE (contd.) Sacramental Information (Please place an "X" next to all Sacraments Received) Baptism Confirmation First Communion Marriage First Child Living with you: First Name: Middle Initial: Last Name: \_\_\_\_\_ Birth Date: Current Grade: Religion (if not Catholic) Male/Female Sacramental Information (Please place an "X" next to all Sacraments Received) Baptism Confirmation First Communion **Second Child Living with you:** First Name: Middle Initial: Last Name: Birth Date: Current Grade: Religion (if not Catholic) Male/Female Sacramental Information (Please place an "X" next to all Sacraments Received) Baptism Confirmation First Communion Third Child Living with you: First Name: Middle Initial: Last Name: Birth Date: Current Grade: Religion (if not Catholic) Male/Female

Sacramental Information (Please place an "X" next to all Sacraments Received)

Baptism\_\_\_\_\_ Confirmation\_\_\_\_\_ First Communion\_\_\_\_\_

**Fourth Child Living with you:** 

First Name: \_\_\_\_\_Middle Initial: \_\_\_Last Name: \_\_\_\_

Birth Date: \_\_\_\_\_ Current Grade: \_\_\_\_\_ Religion (if not Catholic) \_\_\_\_\_ Male/Female \_\_\_\_

Sacramental Information (Please place an "X" next to all Sacraments Received)

Baptism\_\_\_\_\_ Confirmation\_\_\_\_\_ First Communion\_\_\_\_\_

**Note:** If needed, please attach a separate sheet for additional children or other family members living with you such as grandparent, nephew, niece, or cousin.