Our Lady of the Presentation Roman Catholic Church P.O. BOX 1, Poolesville. MD 20837

Parish Registration

Family Name:			
Address:			
Home Phone #	Family Email:		
Do you prefer to use: _	contribution envelopes or	Faith Direct	
	USEHOLD (Circle 1) Mr. Dr.		
	gle Divorced Widowed Marr	ried	
FULL NAME:		····	
Date of Birth	Place	 	
Baptized at what parish?	 	Confirmed - Yes or No	
Date of Marriage	Married by	a Priest – Yes or No	
Place of Marriage			
Occupation	Cell number		
Email			
·	gle Divorced Widowed Marr		
FULL NAME		Maiden NamePlace	
Date of Birth			
Data of Marriage	Married	Confirmed - Yes or No Married by a Priest - Yes or No	
Date of Marriage	wiairieu (by a filest - les of No	
Place of Marriage	C 11 N 1		
Email:	Cell Number		
CHILDREN Full/Middle/Last Name & Relation?	AND OTHERS FROM SAME HO		
2			
3			
4			
Office Use CMS Er	nv # FD	(jlc 2-6-15)	