



# Roman Catholic Diocese of Hamilton in Bermuda

Parish Church of Registration: \_\_\_\_\_

## HEAD OF HOUSEHOLD

Surname:	
First and Middle:	
Maiden:	DOB: M / D / Y
Nationality:	
Marital Status:	Date of Marriage:
Place of Marriage:	
PLEASE WRITE YES or NO	
Baptized: _____ Communion: _____ Confirmation: _____	
Home Address:	
Parish:	
Postal Code:	
Primary Number:	
Work:	
Email:	

## MEMBER OF HOUSEHOLD

Surname:	
First and Middle:	
Maiden:	DOB: M / D / Y
Nationality:	
Marital Status:	Date of Marriage:
Place of Marriage:	
PLEASE WRITE YES or NO	
Baptized: _____ Communion: _____ Confirmation: _____	
Mailing Address (P.O. Box):	
Parish:	
Postal Code:	
Primary Number:	
Work:	
Email:	

## CHILDREN IN HOUSEHOLD UNDER 18 (18 yrs and older need to complete a separate form)

Name: Last – First – Middle	DOB: M/D/Y	Baptized: ___ Communion: ___ Confirmation: ___
Name: Last – First – Middle	DOB: M/D/Y	Baptized: ___ Communion: ___ Confirmation: ___
Name: Last – First – Middle	DOB: M/D/Y	Baptized: ___ Communion: ___ Confirmation: ___
Name: Last – First – Middle	DOB: M/D/Y	Baptized: ___ Communion: ___ Confirmation: ___