HOLY SPIRIT PARISH REGISTRATION	Today's Date:

					J ,	J U.	J				1000	ay 5 Dutc	
FAMILY NAME:									TELEPHONE HOME:				
(Last Name Only)										CELL:			
ADDRESS				APT# CITY			CITY				ZIP		
EMAIL													
							MAG	DITAL INFO	) N A A T	ION	ÇA.	CRAMENTAL INFORM	IATION
		MARITAL INFOR  Mark (check) one the											
	NAMES	Data of Blade					- / tuut						
	NAMES OF ADULTS IN FAMILY  First Name Middle Name Last Name			ma	Date of Birth mm/dd/yy	Marr Church	iage Civil	Sinc	Single Wi		Baptism	First Communion	Confirmation
Father	THSC Name	Wildule Name	Last Ival	iie	mm, dd, yy	Charch	CIVII	Jilig	şic	Widowed	Барцзііі	Communion	Commination
Husband													
Mother													
Wife													
Other Adult													
											*Religious E	d. Provide a copy of t	he Certificate*
	Male				Date of Birth	Schoo				School		First	
	Names of Children			Female	mm/dd/yy	Place of Birth				Grade Baptism		Communion	Confirmation
				M F									
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Office Use Only:													