

**Blessed Sacrament Parish**  
Family Registration  
130 S. Losey Blvd., La Crosse, WI 54601 (608) 782-2953  
bspchurch@yahoo.com

Reg Date: \_\_\_/\_\_\_/\_\_\_  
Office Env. \_\_\_\_\_

Last \_\_\_\_\_ First \_\_\_\_\_

Mailing Name (ie Mr. & Mrs. John \_\_\_\_\_

Address: \_\_\_\_\_ Add2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Area Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Emerg. Phone: \_\_\_\_\_

Family Email: \_\_\_\_\_

.....  
Would you like to receive: Envelopes: Y / N      The Catholic Times: Y / N

**Individual Member Information**

Role:(Head of House, Husband, Wife...) \_\_\_\_\_

First Name / Nickname: \_\_\_\_\_/\_\_\_\_\_

Maiden Name: \_\_\_\_\_

Gender: Male / Female

DOB (mm/dd/yyyy): \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

First Language: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Retired: Previous Occupation: \_\_\_\_\_

**Sacramental Information:**

Baptized: Y / N    Catholic: Y / N

Church / City / State: \_\_\_\_\_

Reconciliation: Y / N    First Eucharist? Y / N    Confirmed: Y / N

Marital Status: \_\_\_\_\_

Any Other Information: \_\_\_\_\_

Role \_\_\_\_\_

Name: \_\_\_\_\_/\_\_\_\_\_

Maiden Name: \_\_\_\_\_

Gender: Male / Female

DOB \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

First Language: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Retired: Previous Occupation: \_\_\_\_\_

**Sacramental Information:**

Baptized: Y / N    Catholic: Y / N

Church / City / State: \_\_\_\_\_

Reconciliation: Y / N    First Eucharist: Y / N    Confirmed: Y / N

Date of Marriage: \_\_\_\_\_

Place of Marriage: \_\_\_\_\_

**DEPENDENTS:**

**1. Full Name:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

Relation to Head of Household: \_\_\_\_\_

Date / Place of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ Baptized: Name of Church/City/State \_\_\_\_\_  
\_\_\_\_\_

Reconciliation: Y / N    1<sup>st</sup> Communion: Y / N    Confirmation: Y / N

Grade / School Attending: \_\_\_\_\_

Any other information: \_\_\_\_\_

**2. Full Name:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

Relation to Head of Household: \_\_\_\_\_

Date / Place of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ Baptized: Name of Church/City/State \_\_\_\_\_  
\_\_\_\_\_

Reconciliation: Y / N    1<sup>st</sup> Communion: Y / N    Confirmation: Y / N

Grade / School Attending: \_\_\_\_\_

Any other information: \_\_\_\_\_

**3. Full Name:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

Relation to Head of Household: \_\_\_\_\_

Date / Place of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ Baptized: Name of Church/City/State \_\_\_\_\_  
\_\_\_\_\_

Reconciliation: Y / N    1<sup>st</sup> Communion: Y / N    Confirmation: Y / N

Grade / School Attending: \_\_\_\_\_

Any other information: \_\_\_\_\_