

Parish Registration Form

Instructions:

- A) There are 15 main questions in this form. Please fill all, or at least fill as much information you know presently and submit your form. Any outstanding detail will be updated as time goes on.
- B) Some of the information required are contained in your Baptismal card. It will be useful if you have it at hand when filling the form.
- C) When required, please mark an **X** in the appropriate box(es)
- D) Please write clearly, and in **CAPITAL LETTERS**
- E) All information supplied will be treated confidentially.
- F) If you require further assistance in completing this form please call the Rev. Father.
- G) A confirmation text message will be sent to your mobile phone when your application has been received and processed. The text message will also contain your Parish Registration Number (PRN).
- H) Thanks for completing this form. God bless you.

1. NAME

1a. Title: _____ Surname/familyname: _____

1b. Baptism name: _____ Other names: _____

2. SEX Male Female

3. RESIDENCE

3a. House No: _____ Street: _____

3b. Area: _____ Town: _____

4. NAME OF CHURCH YOU ATTEND MASS REGULARLY: _____

5. AGE— Date of birth (DD/MMM/YYYY): _____

Age group (please tick one box to indicate your age-group)

- | | | | |
|--------------------------------------|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> 1day-5years | <input type="checkbox"/> 6-12years | <input type="checkbox"/> 13-19years | <input type="checkbox"/> 20-25years |
| <input type="checkbox"/> 26-40years | <input type="checkbox"/> 41-50years | <input type="checkbox"/> 51-69years | <input type="checkbox"/> 70years and above |

6. ETHNIC GROUP or STATE OF ORIGIN: _____

7. WORK/SCHOOL STATUS

- Government service Private company Self-employed
 Student Unemployed Retiree

Work place or School

Name: _____
 Address: _____
 Area: _____
 Town: _____

8. OCCUPATION/PROFESSION/DESIGNATION: _____

9. EDUCATION

Highest education attained (please tick one appropriate box)

- Primary Junior Secondary Senior Secondary OND NCE
 HND Bachelor Master Doctorate

10. MARITAL STATUS (please tick appropriate box)

- Single Married Widow Widower Separated Divorced

11. PHONE (please give functioning number(s), your Parish Reg. Number will be sent through it/them)

GSM 1: _____ GSM 2: _____

12. WWW: Email: _____

Website: _____
 Facebook: _____
 Twitter: _____

13. RECORD OF SACRAMENTS RECEIVED IN *THE CATHOLIC CHURCH*

13a. Baptism— Date: _____ Church of Baptism: _____

Diocese of Baptism: _____ NLB: _____

13b. Holy Communion—Date: _____ Place: _____

13c. Confirmation— Date: _____ Name: _____ Place: _____

13d. Marriage—Date: _____ Place: _____ Partner: _____

14. ORGANISATIONS/ASSOCIATIONS/SOCIETIES IN THE CHURCH

There are the following lay apostolate organisations in the Church to which you are encouraged to belong to and/or to take part in their activities –

- * Women, Men and Youths (CWO, CMO, CYON)
- * Liturgical functionaries – Altar servers/Readers/Choir/Church wardens/Catechists/Service leaders
- * Devotional/praying groups – Sacred Heart/Legion of Mary/Catholic charismatic renewal etc
- * The Church encourages parishioners from the same ethnic group or State of origin to associate. Please feel free to join any group of your choice.

15. SIGNATURE: _____ **DATE:** _____