

Holy Infant Parish Membership Registration Form

Welcome to Holy Infant Church. It is our hope that our parish will be a spiritual home for you and your family. To register please fill out this form and email or mail to Holy Infant Church, 450 Racebrook Road, Orange, CT 06477, office@holylifeorange.org. This information is for our confidential use only.

Online giving is available on our website holylifeorange.org under the "Give Online" tab.

Head of Household: Last Name _____ First Name/MI _____ Informal Name _____

Marital Status: Married Single Divorced Widowed Date of Birth _____

Title (circle one) Mr., Mrs., Miss, Dr. Religion Catholic Other Denomination None

Home Phone _____ Listed _____ Unlisted _____ Home e-mail _____

Street Address _____ City/State _____ ZipCode _____

Occupation _____ Work Number _____

Spouse, housemate, partner: Last Name _____ First Name/MI _____ Informal Name _____

Marital Status: Married Single Divorced Widowed Date of Birth _____

Title (circle one) Mr., Mrs., Miss, Dr. Religion Catholic Other Denomination None

Spouse Maiden Name _____ Married, if yes date _____

Occupation _____ Work Number _____

Children living at home after college (usually working) as well as other adult(s) (e.g., in-laws, grandparents) should register with the parish separately under their own name.

List Children at this address: (give last name if different from Head of Household) including college students away at school.

Full Name _____ Date of Birth ____/____/____ M ____ F ____

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Full Name _____ Date of Birth ____/____/____ M ____ F ____

Talents and Skills or other ministry to offer the Parish:
