FAMILY NAME _____

Office use only: *Entered in ParishSoft:* ☐ *Entered in OSV:* ☐

Date received: _____ *Date processed:* _____

Jesus, the Good Shepherd Parish - *101 Middleton Street*
Riverside, N.J. 08075
(856) 461-0100
http://www.jesusthegoodshepherd.org

Street Address		City:		Zip Code:	

Phone Number	*If married →*	Wife's Maiden Name:		E-mail Address:	
		Married by a Priest or Deacon (Y/N):			

First Name	Marital Status	Date of Birth	Religion	Baptized (Y/N)	1st Communion (Y/N)	Confirmed (Y/N)	Occupation

Children *if living at home*	Male/ Female	Date of Birth (mm/dd/yyyy)	Religion	Baptized (Y/N)	First Communion (Y/N)	Confirmed (Y/N)

Parents *if living at home*	Marital Status	Date of Birth (mm/dd/yyyy)	Religion	Baptized (Y/N)	First Communion (Y/N)	Confirmed (Y/N)