



215 Bishop Road
Cleveland, MS 38732
662-846-6273

PARISH REGISTRATION FORM

**If completing on your computer, please print out to bring to office, mail in,
or place in collection basket at church,
or save on your computer and send as an attachment to olvcc@att.net.**

NAME _____ DATE _____
(Mr., Mrs., Miss, Dr.)

ADDRESS _____
Number and Street Apt. # City Zip

MAILING ADDRESS (if different from above) _____

EMAIL _____

HOME PHONE _____ CELL PHONE _____

DATE OF BIRTH _____ **ETHNIC GROUP _____

RELIGION _____ I have received: Baptism ___ Eucharist ___ Confession ___ Confirmation ___

ARE YOU A DSU STUDENT? _____

CURRENT MARITAL STATUS: Single ___ Married ___ Divorced ___ Widowed ___

OCCUPATION _____ Work Phone _____

PLACE OF EMPLOYMENT _____

WAYS YOU'D LIKE TO VOUNTEER AT THE CHURCH: _____

NAME OF SPOUSE _____
(Mr. , Mrs., Miss, Dr.)

EMAIL _____ CELL PHONE _____

DATE OF BIRTH _____ **ETHNIC GROUP _____

RELIGION _____ I have received: Baptism ___ Eucharist ___ Reconciliation ___ Confirmation ___

OCCUPATION _____ Work Phone _____

PLACE OF EMPLOYMENT _____

WAYS YOU'D LIKE TO VOUNTEER AT THE CHURCH: _____

_____ NEED TO TALK TO A PRIEST (QUESTIONS, ANNULMENT, COUNSELING, ASSISTANCE, ETC.)

****Ethnic Group is for reports submitted each year to the Catholic Diocese.**

CHILDREN LIVING AT HOME (List Oldest to Youngest)

1.) Full name _____ Date of Birth _____

Male or Female? _____ **Ethnic Group _____

School Attending _____ Grade in School _____

Dates/Parish where Sacraments were received if **NOT** at Our Lady of Victories:

Baptism _____ First Communion _____

Reconciliation _____ Confirmation _____

2.) Full name _____ Date of Birth _____

Male or Female? _____ **Ethnic Group _____

School Attending _____ Grade in School _____

Dates/Parish where Sacraments were received if **NOT** at Our Lady of Victories:

Baptism _____ First Communion _____

Reconciliation _____ Confirmation _____

3.) Full name _____ Date of Birth _____

Male or Female? _____ **Ethnic Group _____

School Attending _____ Grade in School _____

Dates/Parish where Sacraments were received if **NOT** at Our Lady of Victories:

Baptism _____ First Communion _____

Reconciliation _____ Confirmation _____

4.) Full name _____ Date of Birth _____

Male or Female? _____ **Ethnic Group _____

School Attending _____ Grade in School _____

Dates/Parish where Sacraments were received if **NOT** at Our Lady of Victories:

Baptism _____ First Communion _____

Reconciliation _____ Confirmation _____

If more room is needed, please provide the information on a separate sheet of paper and attach to this sheet.

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