

1206 East Ninth Street
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Our Lady of Guadalupe

A Stewardship Parish

What is an Active Parishioner?

- One who is registered with the parish
- Attends Mass, regularly
- Tithes at least 5% of income
- Uses a contribution envelope each Sunday
- Volunteers in parish ministries

Member Registration Card

PLEASE PRINT

Family Last Name: _____ Membership Date: _____/_____/_____
Head of Household #1: Male Female
 Mr. _____ Date of Birth: _____/_____/_____
 Mrs. _____ MM DD YYYY
 Ms. _____ MM DD YYYY
Title: First Name Middle Name Preferred Name Last Name Maiden Name
Family Relation: Husband Wife Father Mother Single Adult
Home Address: _____
Street / P.O.Box City State Zip Code
Mailing Address: _____
(If Different from Physical Address) Street City State Zip Code
Email Addresses: _____
Home Phone: () _____ - _____ Cell Phone: () _____ - _____ Work Phone: () _____ - _____
Unlisted: Yes No Unlisted: Yes No Unlisted: Yes No
Fax Phone: () _____ - _____ Language: _____/_____
Unlisted: Yes No Primary Secondary
Marital Status: Married, Catholic Church Married, Other Church Married, Civilly Partnered Common Law
 Single Separated Divorced Widowed Engaged Marriage Date: _____/_____/_____
MM DD YYYY
Religion: _____ Sacraments Received: Baptism First Communion Confirmation
Occupation: _____ Employer: _____
Business Address: _____
Street City State Zip Code

Head of Household #2: Male Female Date of Birth: _____/_____/_____
 Mr. _____ Language: _____/_____
 Mrs. _____ Primary Secondary
 Ms. _____
Title: First Name Middle Name Preferred Name Last Name Maiden Name
Family Relation: Husband Wife Son Daughter Single Adult Father Mother Grandfather
 Grandmother Grandson Granddaughter Uncle Aunt Nephew Niece Brother Sister Other
Email Addresses: _____
Cell Phone: () _____ - _____ Work Phone: () _____ - _____ Fax Phone: () _____ - _____
Unlisted: Yes No Unlisted: Yes No Unlisted: Yes No
Marital Status: Married, Catholic Church Married, Other Church Married, Civilly Partnered Common Law
 Single Separated Divorced Widowed Engaged Marriage Date: _____/_____/_____
MM DD YYYY
Religion: _____ Sacraments Received: Baptism First Communion Confirmation
Occupation: _____ Employer: _____
Business Address: _____
Street City State Zip Code

For office use only:
Family ID: _____ Processed by: _____ Date: _____

Member #3: Male Female Adult Child Date of Birth: ____/____/____
MM DD YYYY

Mr. Language: _____/_____
 Mrs.. Primary Secondary
 Ms.

Title: First Name Middle Name Preferred Name Last Name Maiden Name

Family Relation: Husband Wife Son Daughter Single Adult Father Mother Grandfather
 Grandmother Grandson Granddaughter Uncle Aunt Nephew Niece Brother Sister Other

Email Addresses: _____

Cell Phone: () _____ - _____ Work Phone: () _____ - _____ Fax Phone: () _____ - _____
Unlisted: Yes No Unlisted: Yes No Unlisted: Yes No

Marital Status: Married, Catholic Church Married, Other Church Married, Civilly Partnered Common Law
 Single Separated Divorced Widowed Engaged Marriage Date: ____/____/____
MM DD YYYY

Religion: _____ Sacraments Received: Baptism First Communion Confirmation
Occupation: _____ Employer: _____

Business Address: _____
Street City State Zip Code

Member #4: Male Female Adult Child Date of Birth: ____/____/____
MM DD YYYY

Mr. Language: _____/_____
 Mrs.. Primary Secondary
 Ms.

Title: First Name Middle Name Preferred Name Last Name Maiden Name

Family Relation: Husband Wife Son Daughter Single Adult Father Mother Grandfather
 Grandmother Grandson Granddaughter Uncle Aunt Nephew Niece Brother Sister Other

Email Addresses: _____

Cell Phone: () _____ - _____ Work Phone: () _____ - _____ Fax Phone: () _____ - _____
Unlisted: Yes No Unlisted: Yes No Unlisted: Yes No

Marital Status: Married, Catholic Church Married, Other Church Married, Civilly Partnered Common Law
 Single Separated Divorced Widowed Engaged Marriage Date: ____/____/____
MM DD YYYY

Religion: _____ Sacraments Received: Baptism First Communion Confirmation
Occupation: _____ Employer: _____

Business Address: _____
Street City State Zip Code

Member #5: Male Female Adult Child Date of Birth: ____/____/____
MM DD YYYY

Mr. Language: _____/_____
 Mrs.. Primary Secondary
 Ms.

Title: First Name Middle Name Preferred Name Last Name Maiden Name

Family Relation: Husband Wife Son Daughter Single Adult Father Mother Grandfather
 Grandmother Grandson Granddaughter Uncle Aunt Nephew Niece Brother Sister Other

Email Addresses: _____

Cell Phone: () _____ - _____ Work Phone: () _____ - _____ Fax Phone: () _____ - _____
Unlisted: Yes No Unlisted: Yes No Unlisted: Yes No

Marital Status: Married, Catholic Church Married, Other Church Married, Civilly Partnered Common Law
 Single Separated Divorced Widowed Engaged Marriage Date: ____/____/____
MM DD YYYY

Religion: _____ Sacraments Received: Baptism First Communion Confirmation
Occupation: _____ Employer: _____

Business Address: _____
Street City State Zip Code