

111 W. Rio Grande St.  
Taylor, TX 76574  
Phone:(512)365-2380  
www.nsdguadalupe.org

# Our Lady of Guadalupe

- 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.  Mrs.  Ms. Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
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: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YYYY  
 Mr.  Mrs.  Ms. Language: \_\_\_\_\_/\_\_\_\_\_  
Primary Secondary  
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 I.D.:

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  
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Religion: \_\_\_\_\_ Sacraments Received:  Baptism  First Communion  Confirmation

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_  
Street City State Zip Code