

**St. Hilary Catholic Church**  
**5600 N. Fairfield Ave.**  
**Chicago, IL 60659**

Office Use Only ID# \_\_\_\_\_

Date Registered:  
\_\_\_\_\_

REGISTRATION FORM

**General Household and Mailing Information**

Name (as mail should be addressed): \_\_\_\_\_

Street address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Mailing address (if different): \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_  
Home Home Cell Cell

Family e-mail address: \_\_\_\_\_

Languages spoken in home: \_\_\_\_\_

**Head of Household:**

Title \_\_\_\_\_ Name: \_\_\_\_\_

Sex: M F Birth date: \_\_\_\_\_ City & State of Birth: \_\_\_\_\_  
First Middle Last  
(Country)

Marital Status: single married engaged separated divorced widowed

Special needs? \_\_\_\_\_

Education completed: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer/school phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Religion: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Baptism: Y N Date: \_\_\_\_\_ Church, City, State, (Country): \_\_\_\_\_

Confession/ Reconciliation Y N \_\_\_\_\_

1<sup>st</sup> Communion: Y N \_\_\_\_\_

Confirmation: Y N \_\_\_\_\_

Marriage: Y N \_\_\_\_\_

Other important information: \_\_\_\_\_



**Additional family member:**

Title \_\_\_\_\_ Name: \_\_\_\_\_

First Middle Last

Sex: M F Birth date: \_\_\_\_\_ City & State of Birth: \_\_\_\_\_  
(Country)

Relationship to Head of Household: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Special needs? \_\_\_\_\_

Education completed: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer/school phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Religion: \_\_\_\_\_

E-mail address: \_\_\_\_\_

	Date:	Church, City, State, (Country):
Baptism: Y N	_____	_____
Confession/ Reconciliation Y N	_____	_____
1 <sup>st</sup> Communion: Y N	_____	_____
Confirmation: Y N	_____	_____
Marriage: Y N	_____	_____

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Title \_\_\_\_\_ Name:: \_\_\_\_\_

First Middle Last

Sex: M F Birth date: \_\_\_\_\_ City & State of Birth: \_\_\_\_\_  
(Country)

Relationship to Head of Household: \_\_\_\_\_ Marital Status: \_\_\_\_\_

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Education completed: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer/school phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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Baptism: Y N	_____	_____
Confession/ Reconciliation Y N	_____	_____
1 <sup>st</sup> Communion: Y N	_____	_____
Confirmation: Y N	_____	_____
Marriage: Y N	_____	_____

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\_\_\_\_\_ First Middle Last

Sex: M F Birth date: \_\_\_\_\_ City & State of Birth: \_\_\_\_\_  
(Country)

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Baptism: Y N Date: \_\_\_\_\_ Church, City, State, (Country): \_\_\_\_\_  
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Reconciliation Y N \_\_\_\_\_

1<sup>st</sup> Communion: Y N \_\_\_\_\_

Confirmation: Y N \_\_\_\_\_

Marriage: Y N \_\_\_\_\_

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Title \_\_\_\_\_ Name: \_\_\_\_\_

\_\_\_\_\_ First Middle Last

Sex: M F Birth date: \_\_\_\_\_ City & State of Birth: \_\_\_\_\_  
(Country)

Relationship to Head of Household: \_\_\_\_\_ Marital Status: \_\_\_\_\_

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Employer/school phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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