



Our Lady of Perpetual Help Roman Catholic Church

515 Loch Haven Rd, Edgewater, MD 21037

Parish Registration Form

Family Information

Date Submitted _____

Family Last Name _____

Mailing Name (ex. Mr. and Mrs. Ferdinand Smith, Ms. Garcia and Mr. Jones, Martin Family, etc.) _____

Street Address _____

City, State Zip Code _____

Family Telephone Number _____

Best telephone number for contacting your family. _____

Family E-Mail Address(es) _____

Cell Phone(s) for parish informational texts (FlockNotes) _____

Member Information

Self. First Name _____ Last Name, if different from Family Last Name _____ Gender _____

Title Mr. _____ Mrs. _____ Ms. _____ Miss _____ Dr. _____ Other _____ Maiden Name _____

Date of Birth _____ Place of Birth _____ Marital Status _____ Religion _____

Sacraments: *Please check if received.* Baptism _____ Reconciliation _____ Holy Communion _____ Confirmation _____ Valid Catholic Marriage _____

Please provide date, place and location of Sacraments to the best of your recollection:

Occupation: _____ Employer: _____

Spouse/Other —Please state relationship.

First Name _____ Last Name, if different from Family Last Name _____ Gender _____

Title Mr. _____ Mrs. _____ Ms. _____ Miss _____ Dr. _____ Other _____ Maiden Name _____

Date of Birth _____ Place of Birth _____ Marital Status _____ Religion _____

Sacraments: *Please check if received.* Baptism _____ Reconciliation _____ Holy Communion _____ Confirmation _____ Valid Catholic Marriage _____

Please provide date, place and location of Sacraments to the best of your recollection:

Occupation: _____ Employer: _____

For additional adult members, provide the above information on another sheet of paper or form.

Catholic Review Free to Parishioners

Mail the magazine to me. _____ I will access it online at [www.archbalt.org/catholic review](http://www.archbalt.org/catholic%20review). _____

Contributions to the Parish We rely on your financial support.

Have envelopes mailed to my home. YES _____ NO _____ I will create an online giving account at olph.net/Stewardship. _____

Please return this form to the Parish office, place in the collection basket at Mass, or mail it to the above address. Other possibilities—fax the completed form to 410-798-0076 or attach an electronic copy to secretary@olph.net email. We encourage you to visit the office and meet the staff.

Child Information

First and Middle Name _____ Last Name, if different from Family Last Name _____ gender _____

Relationship Daughter _____ Son _____ Other _____ Date of Birth _____ Age _____

School _____ Grade _____ Religion _____

Sacraments

Baptism _____ City, State, Country _____ Church _____

Reconciliation _____ City, State, Country _____ Church _____

Holy Communion _____ City, State, Country _____ Church _____

Confirmation _____ City, State, Country _____ Church _____

First and Middle Name _____ Last Name, if different from Family Last Name _____ gender _____

Relationship Daughter _____ Son _____ Other _____ Date of Birth _____ Age _____

School _____ Grade _____ Religion _____

Sacraments

Baptism _____ City, State, Country _____ Church _____

Reconciliation _____ City, State, Country _____ Church _____

Holy Communion _____ City, State, Country _____ Church _____

Confirmation _____ City, State, Country _____ Church _____

First and Middle Name _____ Last Name, if different from Family Last Name _____ gender _____

Relationship Daughter _____ Son _____ Other _____ Date of Birth _____ Age _____

School _____ Grade _____ Religion _____

Sacraments

Baptism _____ City, State, Country _____ Church _____

Reconciliation _____ City, State, Country _____ Church _____

Holy Communion _____ City, State, Country _____ Church _____

Confirmation _____ City, State, Country _____ Church _____

First and Middle Name _____ Last Name, if different from Family Last Name _____ gender _____

Relationship Daughter _____ Son _____ Other _____ Date of Birth _____ Age _____

School _____ Grade _____ Religion _____

Sacraments

Baptism _____ City, State, Country _____ Church _____

Reconciliation _____ City, State, Country _____ Church _____

Holy Communion _____ City, State, Country _____ Church _____

Confirmation _____ City, State, Country _____ Church _____

First and Middle Name _____ Last Name, if different from Family Last Name _____ gender _____

Relationship Daughter _____ Son _____ Other _____ Date of Birth _____ Age _____

School _____ Grade _____ Religion _____

Sacraments

Baptism _____ City, State, Country _____ Church _____

Reconciliation _____ City, State, Country _____ Church _____

Holy Communion _____ City, State, Country _____ Church _____

Confirmation _____ City, State, Country _____ Church _____

First and Middle Name _____ Last Name, if different from Family Last Name _____ gender _____

Relationship Daughter _____ Son _____ Other _____ Date of Birth _____ Age _____

School _____ Grade _____ Religion _____

Sacraments

Baptism _____ City, State, Country _____ Church _____

Reconciliation _____ City, State, Country _____ Church _____

Holy Communion _____ City, State, Country _____ Church _____

Confirmation _____ City, State, Country _____ Church _____

Welcome to our parish family.