

Holy Family Catholic Church **W**ELCOMES you to our Parish. If you would like to become a registered parishioner, and receive information from us in the mail, please complete this registration card. Please return this card to our Rectory Office at 18708 S. Clarkdale Avenue, Artesia, CA 90701 or in our Collection Baskets during Mass. Thank you.



Holy Family Catholic Church
18708 S. Clarkdale Avenue
Artesia, CA 90701



(562) 865-2185
www.holyfamilyartesia.org

(Please Print)
Today's Date _____ () New Member () Change of Current Register Information

Name (For Mailing) _____

Street _____ **Apartment/Suite** _____

City _____ **State** _____ **Zip** _____

Home Phone _____ **E-Mail** _____

Last Name _____ **Birthday** _____

First Name _____ **Gender** _____

Religion _____ **Language(s) Spoken** _____

Marital Status: () Married () Separated () Yes () No (Date Married) _____

() Single () Divorced **Are you Married Otherwise?**

() Widowed () Yes () No (Date Married) _____

Spouse's First Name _____ **Birthday** _____

Spouse's Religion _____ **Do you have children?** () Yes () No **If Yes, How Many?** _____

Would you like to Volunteer? () Yes () No