

Registration Date _____/_____/_____

Sacred Heart Parish Vidalia

3119 E. N. St.
Vidalia, GA 30474

Family Information

Last Name _____

Envelope Number _____

Family Email _____

Mailing Name _____

Home Phone () - _____

Emergency Phone () - _____

Address Information

Address 1 _____

Address 2 _____

City _____ State _____ Zip/Postal _____

Publish Phone Publish Address Publish Email Receive Visits Receive Contributions Envelopes

Member Information

First Name _____

Status at Parish _____

Role _____

Nick Name _____

Date of Birth _____

Gender M / F

Email _____

MaidenName _____

Ethnicity _____

Birth Place _____

First Language _____

Work Phone () - _____

Special Needs _____

Cell Phone () - _____

High School Grad Year _____

Sacrament Information

Catholic _____/_____/_____

Baptism _____/_____/_____

Reconciliation Prep _____/_____/_____

Location _____

Location _____

First Eucharist _____/_____/_____

Location _____

Confirmation _____/_____/_____

Catholic Marriage _____/_____/_____

Location _____

Location _____

Member Information

First Name _____
Role _____
Date of Birth _____
Email _____
Ethnicity _____
First Language _____
Special Needs _____

Status at Parish _____
Nick Name _____
Gender M / F
MaidenName _____
Birth Place _____
Work Phone () - _____
Cell Phone () - _____
High School Grad Year _____

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 Confirmation _____
Location _____

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Location _____
 First Eucharist _____
Location _____
 Catholic Marriage _____
Location _____

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