

Today's Date: \_\_\_\_\_

Env No. : \_\_\_\_\_

**Nativity of Our Lady Catholic Community**  
 221 Daly Ave, San Luis Obispo CA 93405 Tel: 805-544-2357 / www.NativitySLO.org  
**Parish Registration / Update Form v. 8-16-2023**

**NOTE: IF YOU ARE REGISTERING FOR ANY RELIGIOUS EDUCATION PROGRAM FOR AGES 3.5 – 18,  
 PLEASE ALSO COMPLETE A RELIGIOUS EDUCATION FORM.**

**Family Information** (this information is common to all members of your household)

New Parish Registration    Update Registration

Family Email: \_\_\_\_\_

FAMILY Name: \_\_\_\_\_

Emergency Mobile Phone: \_\_\_\_\_

Address: \_\_\_\_\_

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

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Please send us Contribution Envelopes   OR    Please send us info on donating automatically through checking or credit card  
*Please contact us about becoming involved in any of the following ministries:*    After Mass Food/Hospitality    Prayer Shawl  
 Taking Communion to the Sick    Prison / Restorative Justice Outreach    Pregnancy Center    Homeless/Prado Outreach  
 Lector    Eucharistic Minister    Usher    Music/Tech    Liturgical Environment    Altar Linens    Altar Server  
 Children's Liturgy of the Word    Seniors Outreach    Bereavement Ministry    Religious Education

**Individual #1 Information** (Complete information for each Active Registering Member of your household, including minor children - see back or make copies for additional space).

**Circle one:**   Head of HH / Husband / Wife / Son / Daughter /

Maiden Name: \_\_\_\_\_

Guardian / Other: \_\_\_\_\_

Birth Place: \_\_\_\_\_

First Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Last Name: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Nick Name: \_\_\_\_\_

Personal Email: \_\_\_\_\_

Gender: M / F   Date of Birth: \_\_\_\_\_

Current School Level: \_\_\_\_\_

Primary Language: \_\_\_\_\_

**NOTES:**

Any special needs? \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

**Individual's Sacramental Information**

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

Marital Status: \_\_\_\_\_

Date Baptized: \_\_\_\_\_

Church: \_\_\_\_\_

Date First Eucharist: \_\_\_\_\_

Church: \_\_\_\_\_

Date Confirmation: \_\_\_\_\_

Church: \_\_\_\_\_

**Individual #2 Information** (Complete information for each Active Registering Member of your household, including minor children.)

Circle one: Head of HH / Husband / Wife / Son / Daughter /  
Guardian / Other: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Nick Name: \_\_\_\_\_  
Gender: M / F Date of Birth: \_\_\_\_\_  
Primary Language: \_\_\_\_\_

Any special needs? \_\_\_\_\_  
Employer: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_  
Personal Email: \_\_\_\_\_  
Current School Level: \_\_\_\_\_

**Individual's Sacramental Information**

Religion: \_\_\_\_\_  
Date Baptized: \_\_\_\_\_  
Date First Eucharist: \_\_\_\_\_  
Date Confirmation: \_\_\_\_\_

Marital Status: \_\_\_\_\_  
Church: \_\_\_\_\_  
Church: \_\_\_\_\_  
Church: \_\_\_\_\_

**Individual #3 Information** (Complete information for each Active Registering Member of your household, including minor children.)

Circle one: Head of HH / Husband / Wife / Son / Daughter /  
Guardian / Other: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Nick Name: \_\_\_\_\_  
Gender: M / F Date of Birth: \_\_\_\_\_  
Primary Language: \_\_\_\_\_

Any special needs? \_\_\_\_\_  
Employer: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_  
Birth Place: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_  
Personal Email: \_\_\_\_\_  
Current School Level: \_\_\_\_\_

**Individual's Sacramental Information**

Religion: \_\_\_\_\_  
Date Baptized: \_\_\_\_\_  
Date First Eucharist: \_\_\_\_\_  
Date Confirmation: \_\_\_\_\_

Marital Status: \_\_\_\_\_  
Church: \_\_\_\_\_  
Church: \_\_\_\_\_  
Church: \_\_\_\_\_

Please make copies of this side for additional members and attach to this registration form.