

HOLY CROSS & ST. PATRICK'S FAMILY

9719, State Rte, 97 *Callicoon, NY 12723-0246

www.holycrosscallicoon.org* (845) 887-5450 * email: holycrosscallicoonny@gmail.com

PARISHIONER REGISTRATION FORM

Date _____

Name (for parish mailings) _____ Married: yes no

Address _____

building / street

apt

city/ST/zip

Home phone _____

cell phone _____

E-mail _____

Female _____

Last name

first name

MI

Religion _____ Baptism Communion Confirmation

Male _____

Last name

first name

MI

Religion _____ Baptism Communion Confirmation

Children:

Name	dates: birth	Baptism	Communion	Confirmation	School
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Name	dates: birth	Baptism	Communion	Confirmation	School
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