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# Our Mother of Consolation Parish Registration Form

7 E. Chestnut Ave, Philadelphia, PA 19118 ♦ 215-247-0430 ♦ [www.omcparish.com](http://www.omcparish.com)

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**Parish Mission Statement** - *Nourished by the Word and Eucharist, we, the members of Our Mother of Consolation Parish, strive to create a vital, welcoming Catholic faith community that embraces each person. Acknowledging our blessings and supporting one other, we humbly serve the needs of God's people and work to be the presence of Christ in our world.*

Email as an attachment to [mcassidy@omcparish.com](mailto:mcassidy@omcparish.com)  
or print out & mail to the parish office



**W**elcome to Our Mother of Consolation Parish Community! We are grateful for your presence here and we look forward to you becoming an active member of our faith community.

**Please completely answer all items on this Parish Registration Form.** The information you provide enables us to serve our diverse community, helping us to determine needs and plan future programs to support the needs of our parishioners. Our Mother of Consolation makes no judgment based on age, gender, race or marital status. Your responses will be available only to parish staff and the Archdiocese; this information will not be shared with anyone else.

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Family Name: \_\_\_\_\_ Date:   -   -

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip:      -

Home Phone Number:    -    -        Listed  Unlisted

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**Adult #1:** Religion: \_\_\_\_\_ Gender:  Male  Female

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
(First - Middle - Last)

Goes by Name (Nickname): \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Preferred e-mail address: \_\_\_\_\_ Cell# --

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Languages other than English: \_\_\_\_\_

Marital status:  Single  Married  Widowed  Separated  Divorced

Race:  White  Black  Bi-racial  Asian  Native American  Hispanic  Mixed race

**Sacraments Received:** (please submit a baptismal certificate with sacrament notations for this person)

Baptism Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Church: \_\_\_\_\_

First Reconciliation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

First Eucharist Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

Confirmation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

Marriage Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Church: \_\_\_\_\_

Married by Priest  Married outside the Church with permission  Married outside the Church

Occupation: \_\_\_\_\_ Degree achieved: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: --

**Any Adult, other than a married Spouse, please register on a separate registration form**

**Adult #2 (Spouse):** Religion: \_\_\_\_\_ Gender:  Male  Female

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
(First - Middle - Last)

Goes by Name (Nickname): \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Preferred e-mail address: \_\_\_\_\_ Cell# --

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Languages other than English: \_\_\_\_\_

Race:  White  Black  Bi-racial  Asian  Native American  Hispanic  Mixed race

**Sacraments Received:** (please submit a baptismal certificate with sacrament notations for this person)

Baptism Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Church: \_\_\_\_\_

First Reconciliation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

First Eucharist Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

Confirmation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

Occupation: \_\_\_\_\_ Degree achieved: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: --

**Adult Children (25 & older) who live at home please register on a separate registration form**

**Child #1 (At Home)** Religion: \_\_\_\_\_ Gender:  Male  Female

Name: \_\_\_\_\_  
(First - Middle – Last)

Goes by Name (Nickname): \_\_\_\_\_

Birth date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Languages other than English: \_\_\_\_\_

Race:  White  Black  Bi-racial  Asian  Native American  Hispanic  Mixed race

School: Pre-K thru 12 \_\_\_\_\_ Grade Level: \_\_\_\_\_

College/University: \_\_\_\_\_ Year: \_\_\_\_\_

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

**Sacraments Received:** (please submit a baptismal certificate with sacrament notations for this person)

Baptism Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Church: \_\_\_\_\_

First Reconciliation Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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

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

Any comments that would be helpful for us to serve your child: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**Child #2 (At Home)** Religion: \_\_\_\_\_ Gender:  Male  Female

Name: \_\_\_\_\_  
(First - Middle – Last)

Goes by Name (Nickname): \_\_\_\_\_

Birth date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Languages other than English: \_\_\_\_\_

Race:  White  Black  Bi-racial  Asian  Native American  Hispanic  Mixed race

School: Pre-K thru 12 \_\_\_\_\_ Grade Level: \_\_\_\_\_

College/University: \_\_\_\_\_ Year: \_\_\_\_\_

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

**Sacraments Received:** (please submit a baptismal certificate with sacrament notations for this person)

Baptism Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Church: \_\_\_\_\_

First Reconciliation Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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

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

Any comments that would be helpful for us to serve your child: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Child #3 (At Home)** Religion: \_\_\_\_\_ Gender:  Male  Female

Name: \_\_\_\_\_  
(First - Middle - Last)

Goes by Name (Nickname): \_\_\_\_\_

Birth date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Languages other than English: \_\_\_\_\_

Race:  White  Black  Bi-racial  Asian  Native American  Hispanic  Mixed race

School: Pre-K thru 12 \_\_\_\_\_ Grade Level: \_\_\_\_\_

College/University: \_\_\_\_\_ Year: \_\_\_\_\_

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

**Sacraments Received:** (please submit a baptismal certificate with sacrament notations for this person)

Baptism Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Church: \_\_\_\_\_

First Reconciliation Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

First Eucharist Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

Confirmation Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

Any comments that would be helpful for us to serve your child: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**Child #4 (At Home)** Religion: \_\_\_\_\_ Gender:  Male  Female

Name: \_\_\_\_\_  
(First - Middle - Last)

Goes by Name (Nickname): \_\_\_\_\_

Birth date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Languages other than English: \_\_\_\_\_

Race:  White  Black  Bi-racial  Asian  Native American  Hispanic  Mixed race

School: Pre-K thru 12 \_\_\_\_\_ Grade Level: \_\_\_\_\_

College/University: \_\_\_\_\_ Year: \_\_\_\_\_

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

**Sacraments Received:** (please submit a baptismal certificate with sacrament notations for this person)

Baptism Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Church: \_\_\_\_\_

First Reconciliation Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

First Eucharist Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

Confirmation Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

Any comments that would be helpful for us to serve your child: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please make copies for additional children at home**