

1206 East Ninth Street  
 Austin, Texas 78702-2699  
 Phone: (512) 478-7955  
 Fax (512) 478-8377  
 www.olgaustin.org

# Our Lady of Guadalupe

## A Stewardship Parish

- What is an Active Parishioner?**
- One who is registered with the parish
  - Attends Mass, regularly
  - Tithes at least 5% of income
  - Uses a contribution envelope each Sunday
  - Volunteers in parish ministries

### Member Registration Card

**PLEASE PRINT**

Family Last Name: \_\_\_\_\_ Membership Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MM DD YYYY

Head of Household #1:  Male  Female  
 Mr. Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Mrs. MM DD YYYY  
 Ms.

Title: First Name Middle Name Preferred Name Last Name Maiden Name

Family Relation:  Husband  Wife  Father  Mother  Single Adult

Home Address: \_\_\_\_\_  
Street / P.O.Box City State Zip Code

Mailing Address: \_\_\_\_\_  
(If Different from Physical Address) Street City State Zip Code

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

Home Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_  
Unlisted:  Yes  No Unlisted:  Yes  No Unlisted:  Yes  No

Fax Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Language: \_\_\_\_\_/\_\_\_\_\_  
Unlisted:  Yes  No Primary Secondary

Marital Status:  Married, Catholic Church  Married, Other Church  Married, Civilly  Partnered  Common Law  
 Single  Separated  Divorced  Widowed  Engaged Marriage Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MM DD YYYY

Religion: \_\_\_\_\_ Sacraments Received:  Baptism  First Communion  Confirmation

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

Business Address: \_\_\_\_\_  
Street City State Zip Code

Head of Household #2:  Male  Female Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MM DD YYYY

Mr. Language: \_\_\_\_\_/\_\_\_\_\_  
 Mrs. Primary Secondary  
 Ms.

Title: First Name Middle Name Preferred Name Last Name Maiden Name

Family Relation:  Husband  Wife  Son  Daughter  Single Adult  Father  Mother  Grandfather  
 Grandmother  Grandson  Granddaughter  Uncle  Aunt  Nephew  Niece  Brother  Sister  Other

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

Cell Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Fax Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_  
Unlisted:  Yes  No Unlisted:  Yes  No Unlisted:  Yes  No

Marital Status:  Married, Catholic Church  Married, Other Church  Married, Civilly  Partnered  Common Law  
 Single  Separated  Divorced  Widowed  Engaged Marriage Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MM DD YYYY

Religion: \_\_\_\_\_ Sacraments Received:  Baptism  First Communion  Confirmation

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

Business Address: \_\_\_\_\_  
Street City State Zip Code

**For office use only:**  
 Family ID: \_\_\_\_\_ Processed by: \_\_\_\_\_ Date: \_\_\_\_\_

Member #3:  Male  Female  Adult  Child Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YYYY

Mr.  Mrs.  Ms. Language: \_\_\_\_/\_\_\_\_  
Primary Secondary

Title: First Name Middle Name Preferred Name Last Name Maiden Name

Family Relation:  Husband  Wife  Son  Daughter  Single Adult  Father  Mother  Grandfather  
 Grandmother  Grandson  Granddaughter  Uncle  Aunt  Nephew  Niece  Brother  Sister  Other

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

Cell Phone: ( ) \_\_\_\_ - \_\_\_\_ Work Phone: ( ) \_\_\_\_ - \_\_\_\_ Fax Phone: ( ) \_\_\_\_ - \_\_\_\_  
Unlisted:  Yes  No Unlisted:  Yes  No Unlisted:  Yes  No

Marital Status:  Married, Catholic Church  Married, Other Church  Married, Civilly  Partnered  Common Law  
 Single  Separated  Divorced  Widowed  Engaged Marriage Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YYYY

Religion: \_\_\_\_\_ Sacraments Received:  Baptism  First Communion  Confirmation

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

Business Address: \_\_\_\_\_  
Street City State Zip Code

Member #4:  Male  Female  Adult  Child Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YYYY

Mr.  Mrs.  Ms. Language: \_\_\_\_/\_\_\_\_  
Primary Secondary

Title: First Name Middle Name Preferred Name Last Name Maiden Name

Family Relation:  Husband  Wife  Son  Daughter  Single Adult  Father  Mother  Grandfather  
 Grandmother  Grandson  Granddaughter  Uncle  Aunt  Nephew  Niece  Brother  Sister  Other

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

Cell Phone: ( ) \_\_\_\_ - \_\_\_\_ Work Phone: ( ) \_\_\_\_ - \_\_\_\_ Fax Phone: ( ) \_\_\_\_ - \_\_\_\_  
Unlisted:  Yes  No Unlisted:  Yes  No Unlisted:  Yes  No

Marital Status:  Married, Catholic Church  Married, Other Church  Married, Civilly  Partnered  Common Law  
 Single  Separated  Divorced  Widowed  Engaged Marriage Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YYYY

Religion: \_\_\_\_\_ Sacraments Received:  Baptism  First Communion  Confirmation

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

Business Address: \_\_\_\_\_  
Street City State Zip Code

Member #5:  Male  Female  Adult  Child Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YYYY

Mr.  Mrs.  Ms. Language: \_\_\_\_/\_\_\_\_  
Primary Secondary

Title: First Name Middle Name Preferred Name Last Name Maiden Name

Family Relation:  Husband  Wife  Son  Daughter  Single Adult  Father  Mother  Grandfather  
 Grandmother  Grandson  Granddaughter  Uncle  Aunt  Nephew  Niece  Brother  Sister  Other

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

Cell Phone: ( ) \_\_\_\_ - \_\_\_\_ Work Phone: ( ) \_\_\_\_ - \_\_\_\_ Fax Phone: ( ) \_\_\_\_ - \_\_\_\_  
Unlisted:  Yes  No Unlisted:  Yes  No Unlisted:  Yes  No

Marital Status:  Married, Catholic Church  Married, Other Church  Married, Civilly  Partnered  Common Law  
 Single  Separated  Divorced  Widowed  Engaged Marriage Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MM DD YYYY

Religion: \_\_\_\_\_ Sacraments Received:  Baptism  First Communion  Confirmation

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

Business Address: \_\_\_\_\_  
Street City State Zip Code