

Our Lady Of Angels
 Roman Catholic Church
 1721 Hillside Drive, Burlingame California 94010
www.olaparish.org 650-347-7768

Parishioner Information Form

(#1) Adult in Household			
First Name		Middle Name	Last Name
Address		City	State Zip
Telephone (Home)		Telephone (Work)	
Occupation/ Employer		Preferred Email Address	
Date of Birth		Religion	
Sacramental History (Adult #1)			
Baptism	Date	Parish	City/ State
Eucharist	Date	Parish	City/ State
Confirmation	Date	Parish	City/ State
Marriage	Date	Parish	City/ State
(#2) Adult in Household			
First Name		Middle Name	Last Name
Address		City	State Zip
Telephone (Home)		Telephone (Work)	
Occupation/ Employer		Preferred Email Address	
Date of Birth		Religion	

Sacramental History (Adult #2)			
Baptism			
	Date	Parish	City/ State
Eucharist			
	Date	Parish	City/ State
Confirmation			
	Date	Parish	City/ State
Marriage			
	Date	Parish	City/ State

NAMES AND SACRAMENTAL INFORMATION OF YOUR CHILDREN

First Name		Middle Name		Last Name		Date of Birth	
Sacramental History							
Baptism							
	Date	Parish		City/ State			
Eucharist							
	Date	Parish		City/ State			
Confirmation							
	Date	Parish		City/ State			
First Name		Middle Name		Last Name		Date of Birth	
Sacramental History							
Baptism							
	Date	Parish		City/ State			
Eucharist							
	Date	Parish		City/ State			
Confirmation							
	Date	Parish		City/ State			
First Name		Middle Name		Last Name		Date of Birth	
Sacramental History							
Baptism							
	Date	Parish		City/ State			
Eucharist							
	Date	Parish		City/ State			