

Parish Registration/Update Form

First Name: _____ Last Name: _____

Address: _____ City: _____

State: ____ Zip: _____

Email: _____

Phone Number: _____

New Registration (Circle one): Yes No

Change of e-mail address (Circle one): Yes No

Moving out of Parish (Circle one): Yes No

Change of Address (Circle one): Yes No

Request Envelopes (Circle one): Yes No

Comments: _____

Mail or Drop this filled out form to: Holy Spirit Parish, 236 Eldridge Rd Wells, ME 04090