



HMC

The Holy Mothers Collaborative

St Mary of the Sacred Heart • St. Helen, Mother of the Emperor Constantine

## Collaborative Parish Registration Form

(Please check off which parish you are looking to register in)

**St. Mary of the Sacred Heart**

**392 Hanover Street**

**Hanover, MA 02339**

**St Helen, Mother of the Emperor Constantine**

**383 Washington Street**

**Norwell, MA 02061**

### Family Information

Family Last Name: \_\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

First Name (Head of household) : \_\_\_\_\_ Nickname : \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Marital Status: (Single, Married, Separated, Divorced, etc) \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt/ Suite: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip Code (plus 4) \_\_\_\_\_ (\_\_\_\_)

Primary Family Email address: \_\_\_\_\_ Catholic: (yes/no): \_\_\_\_\_

Home Phone # \_\_\_\_\_ Emergency Phone # \_\_\_\_\_

Emergency Phone Description : (Mom's cell, etc) \_\_\_\_\_

We would like to:  Give Online  Receive Collection Envelopes (Office Use: Env # \_\_\_\_\_)

We would like more information about:

Parish Ministries,  Parish Events  Faith Formation (Adults or Children)  Volunteer Opportunities

Were you previously registered in a parish within the Archdiocese of Boston? If yes, please fill tell us where:

Previous Parish Name \_\_\_\_\_ (Town/City) \_\_\_\_\_

### Additional Family Members: Member #2

First name:: \_\_\_\_\_ Nick Name: \_\_\_\_\_

Last Name (if different from Family last name): \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Role in Household (Spouse, Son, Daughter, etc) \_\_\_\_\_ Catholic: (yes/no): \_\_\_\_\_

Marital Status: (Single, Married, Separated, Divorced, widowed): \_\_\_\_\_

Any Special Needs/Allergies we should be aware of ??? \_\_\_\_\_

**Additional Family Members (Continued):**

**Member #3-** Relationship to Head of Household (Spouse, Son, Daughter, etc) \_\_\_\_\_

First name:: \_\_\_\_\_ Nick Name: \_\_\_\_\_

Last Name (if different from Family last name): \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Role in Household (Spouse, Son, Daughter, etc) \_\_\_\_\_

Marital Status: (Single, Married, Separated, Divorced, widowed): \_\_\_\_\_ Catholic: (yes/no): \_\_\_\_\_

Are any Special Needs/Allergies we should be aware of: \_\_\_\_\_

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**Member #4-** Relationship to Head of Household (Spouse, Son, Daughter, etc) \_\_\_\_\_

First name:: \_\_\_\_\_ Nick Name: \_\_\_\_\_

Last Name (if different from Family last name): \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Role in Household (Spouse, Son, Daughter, etc) \_\_\_\_\_

Marital Status: (Single, Married, Separated, Divorced, widowed): \_\_\_\_\_ Catholic: (yes/no): \_\_\_\_\_

Are any Special Needs/Allergies we should be aware of: \_\_\_\_\_

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**Member #5-** Relationship to Head of Household (Spouse, Son, Daughter, etc) \_\_\_\_\_

First name:: \_\_\_\_\_ Nick Name: \_\_\_\_\_

Last Name (if different from Family last name): \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Role in Household (Spouse, Son, Daughter, etc) \_\_\_\_\_

Marital Status: (Single, Married, Separated, Divorced, widowed): \_\_\_\_\_ Catholic: (yes/no): \_\_\_\_\_

Are any Special Needs/Allergies we should be aware of: \_\_\_\_\_

**Do you have any additional questions or comments that you would like us to be made aware of?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Welcome to our Parish Family!

For up-to-date information about the Holy Mothers Collaborative (St. Mary and St. Helen)  
please visit us at [www.holymothers.com](http://www.holymothers.com) or [www.lifeteensmash.com](http://www.lifeteensmash.com).  
**Parish Office : (781) 826-4303 or email us at [info@holymothers.com](mailto:info@holymothers.com)**