
Please do not write above this line; reserved for parish office use.

St. Thomas Aquinas Catholic Church Registration Form (Rev. 3/7/2017)

(Please list everyone in your household. There is space for children and more adults on the back.)

Envelope Number: _____
Parish Office Use Only

Date: _____ If transferring from another parish, which one? _____

Household Contact Information

Home Address _____ City _____ Zip Code _____

Best phone # to reach your family _____ This is a (check one) Cell phone Landline

Best Email to reach your family _____ Preferred Language _____

We send a moderate number of general parish emails (normally fewer than 24 per year). Are you willing to receive them? Yes No

How do you prefer to receive the *Catholic Herald*? Paper edition by mail e-Edition Both Question? _____

Adult 1: Name: _____ Maiden Name _____

Title First Name Middle Name Last or Surname (if applicable)

Preferred name/nickname _____ Gender: Male Female Date of Birth _____
mm dd yyyy

Current Religion: _____ Sacraments received: Baptism Religion of Baptism _____ 1st Eucharist Confirmation

Marital Status: Married Anniversary date ___/___/___ Single Widowed Divorced Separated Engaged Other _____
mm dd yyyy

Cell # _____ Email: _____

Occupation _____ Employer _____

Adult 2: Name: _____ Maiden Name _____

Title First Name Middle Name Last or Surname (if applicable)

Preferred name/nickname _____ Gender: Male Female Date of Birth _____
mm dd yyyy

Current Religion: _____ Sacraments received: Baptism Religion of Baptism _____ 1st Eucharist Confirmation

Marital Status: Married Anniversary date ___/___/___ Single Widowed Divorced Separated Engaged Other _____
mm dd yyyy

Cell # _____ Email: _____

Occupation _____ Employer _____

Relationship to Adult 1: Spouse Child Parent Other _____

If one adult is not Catholic or not active, should that adult's name appear on parish mailings? Yes No

Child 1 Name: _____ Gender: Male Female
First Middle Last or Surname
 Lives at home? Yes No Registering with parish? Yes No Relationship to adults on front _____
 Date of Birth _____ Current Religion: _____ Religion of Baptism _____
 Sacraments received: Baptism First Eucharist Confirmation

Child 2 Name: _____ Gender: Male Female
First Middle Last or Surname
 Lives at home? Yes No Registering with parish? Yes No Relationship to adults on front _____
 Date of Birth _____ Current Religion: _____ Religion of Baptism _____
 Sacraments received: Baptism First Eucharist Confirmation

Child 3 Name: _____ Gender: Male Female
First Middle Last or Surname
 Lives at home? Yes No Registering with parish? Yes No Relationship to adults on front _____
 Date of Birth _____ Current Religion: _____ Religion of Baptism _____
 Sacraments received: Baptism First Eucharist Confirmation

Child 4 Name: _____ Gender: Male Female
First Middle Last or Surname
 Lives at home? Yes No Registering with parish? Yes No Relationship to adults on front _____
 Date of Birth _____ Current Religion: _____ Religion of Baptism _____
 Sacraments received: Baptism First Eucharist Confirmation

Child 5 Name: _____ Gender: Male Female
First Middle Last or Surname
 Lives at home? Yes No Registering with parish? Yes No Relationship to adults on front _____
 Date of Birth _____ Current Religion: _____ Religion of Baptism _____
 Sacraments received: Baptism First Eucharist Confirmation

Others in household: Please include full name, gender, birthdate, religion, relationship to adults on front, and any phone numbers or email addresses we should have.

If you need space for additional children, please use another registration form.