ST. THERESE CHURCH
REGISTRATION FORM
CONFIDENTIAL

Welcome to St. Therese Parish!

Today's Date: _____

PLEASE PRINT!

FAMILY NAME: _____

STREET ADDRESS: _____ APT. NO. ____ CITY: _____

ZIP:____ PHONE (HOME) _____ WORK: _____ EMAIL: _____

NAME OF HEAD OF HOUSEHOLD: _____/_____/_____
FIRST MIDDLE INIT. BIRTH DATE

OCCUPATION OF HEAD OF HOUSEHOLD: _____RELIGION: _____
SACRAMENTS REC'D: BAPTISM:____ 1ST COMMUNION: ____ CONFIRMATION: _____

NAME OF SPOUSE (IF MARRIED): _____/_____/_____
FIRST MIDDLE INIT. BIRTH DATE

OCCUPATION OF SPOUSE: _____ RELIGION:_____
SACRAMENTS REC'D: BAPTISM:____ 1ST COMMUNION: ____ CONFIRMATION: _____

CHILDREN (LIST ONLY IF 18 YEARS OF AGE OR UNDER **AND** CURRENTLY LIVING WITH YOU. LAST NAME, IF DIFFERENT: _____

(ENTER "X" IF SACRAMENT WAS RECEIVED:)

FIRST NAME	INITIAL	BIRTH DATE	MALE/FEM.	BAPTIZED?	1ST COMM?	CONFIRM?

IF MORE SPACE IS NEEDED TO LIST CHILDREN, PLEASE DO SO ON THE BACK OF THIS SHEET AND CHECK HERE ____.

IS THERE ANY TYPE OF GROUP OR MINISTRY IN WHICH YOU MAY BE INTERESTED IN PARTICIPATING? _____

_____

_____