

St. Thomas Aquinas Church Parish Registration Form

Office Use: #

FAMILY INFORMATION		
Last Name:		
Address:		
City:	State:	Zip Code:
Home Phone:		Cell Phones:
Email:		

PRIMARY CONTACT INFORMATION		
	Adult 1	Adult 2
Last Name:		
First Name:		
Middle Name:		
		Maiden Name:
Birthdate: M/D/YYYY		
Religion:		
Date of Marriage: M/D/YYYY		
Church of Marriage: City/State:		
Sacraments Received:		
Baptism	Yes/No Church:	Yes/No Church:
First Communion	Yes/No Church:	Yes/No Church:
Confirmation	Yes/No Church:	Yes/No Church:

CHILDREN(S) INFORMATION						
Last Name	First	Birthdate	Date/Church of Baptism	Place of Baptism	Date/Church of First Communion	Date/Church of Confirmation
1.						
2.						
3.						
4.						

PARISH STEWARDSHIP		
We know that you will benefit greatly from being a member of our parish community and hope that you will consider giving back to your parish. There are many ways to do this through volunteer time and through financial support. Good disciples are good stewards. They know that God has given them time, talent, and treasure to be shared with others.		
Would you financially support the parish with stewardship envelopes or will you contribute through a direct deposit offering?	Envelopes	Direct Deposit
Would anyone in the family like to participate in a ministry at this time? (reader, Eucharistic minister, altar server, sacristan, musician)	Yes	No
Would anyone in the family like to be contacted when volunteers are needed for parish committees and events? Comments:	Yes	No
I/we have skills and would be willing to volunteer in the following capacity: carpentry plumbing electrical masonry painting computer/IT fundraising lawn care office help		
Is any family member confined to home or have special needs? Comments:	Yes	No
Would you like to speak to a priest?	Yes	No