

PLEASE PRINT CLEARLY

St. Theresa Parish Registration Form



Today's Date: _____ Year-Round Resident: Yes No Part-Time Resident: Yes No
 Family Last Name: _____ Title: (Circle) Mr. / Mrs. / Ms. / Miss / Other: _____
 Address: _____ Apt. # _____ City _____ Zip _____
 Home Phone: _____ Primary Language _____

		Registrant	Spouse
First Name			
Last Name (if different than Family Name above)			
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Date of Birth MM-DD-YYYY			
Religion	<input type="checkbox"/> Catholic <input type="checkbox"/> Other: _____	<input type="checkbox"/> Catholic <input type="checkbox"/> Other: _____	
Ethnicity (Census purposes only)			
Business Phone			
Cell Phone			
Occupation			
Employer			
Contact E-Mail			
Special Needs (Please indicate)			
Military Veteran	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Baptized Catholic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
First Reconciliation (Confession)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
First Communion	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Confirmation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of Marriage MM-DD-YYYY			
Please circle your current marital status. (See codes below)	1 2 3 4 5 6 7	1 2 3 4 5 6 7	

(1) Single (2) Married by a priest (3) Married by other than a priest (4) Separated (5) Divorced (6) Engaged (7) Widowed

(Please list any children on back of form →)

Dependent children under 22 living with you

	Child	Child	Child	Child	Other Adult (living in home)
First Name					
Last Name					
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth MM-DD-YYYY					
Religion	<input type="checkbox"/> Catholic <input type="checkbox"/> Other _____	<input type="checkbox"/> Catholic <input type="checkbox"/> Other _____	<input type="checkbox"/> Catholic <input type="checkbox"/> Other _____	<input type="checkbox"/> Catholic <input type="checkbox"/> Other _____	<input type="checkbox"/> Catholic <input type="checkbox"/> Other _____
Contact E-Mail (18 and over only)					
Special Needs					
Ethnicity (Census purposes only)					
Military Veteran	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Baptized Catholic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
First Reconciliation (Confession)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
First Eucharist	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Confirmation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

All information obtained will be kept strictly confidential.

Thank You for Registering with St. Theresa Parish.

Welcome to the community!