

# Saint Thomas Aquinas Parish Re-Registration Form

*Please print legibly and be as thorough as possible.*

*The more information you provide, the more complete the record will be.*

Last Name of Family \_\_\_\_\_ Envelope # (if known) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**ADULT #1** (considered head of household) Circle one Dr. Mr. Mrs. Miss

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Middle Name \_\_\_\_\_ Maiden Name (if applicable) \_\_\_\_\_

Nickname Known As or Goes By \_\_\_\_\_ Circle One male female

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ City of birth \_\_\_\_\_ State \_\_\_\_\_

Ethnicity \_\_\_\_\_ Marital Status \_\_\_\_\_

Primary Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Circle One: landline cell

Personal E-Mail \_\_\_\_\_ @ \_\_\_\_\_

Employer \_\_\_\_\_ City \_\_\_\_\_

Employer's Work Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Position: \_\_\_\_\_

I prefer communication by (circle one) email text to cell phone both email & text

Ok to publish address? (circle one) yes no Ok to publish phone #? (circle one) yes no

Ok to publish email? (circle one) yes no Ok to publish photo? (circle one) yes no

Religion \_\_\_\_\_

Baptismal Year \_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

First Communion Year \_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Confirmation Year \_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Married Year \_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_ OR n/a

Notes (special needs, unique talents, medical alerts, etc.) \_\_\_\_\_

**ADULT #2**    Circle one    Dr.    Mr.    Mrs.    Miss

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Middle Name \_\_\_\_\_ Maiden Name (if applicable) \_\_\_\_\_

Nickname Known As or Goes By \_\_\_\_\_ Circle One    male    female

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ City of birth \_\_\_\_\_ State \_\_\_\_\_

Ethnicity \_\_\_\_\_ Marital Status \_\_\_\_\_

Primary Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Circle One:    landline    cell

Personal E-Mail \_\_\_\_\_ @ \_\_\_\_\_

Employer \_\_\_\_\_ City \_\_\_\_\_

Employer's Work Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Position: \_\_\_\_\_

Ok to publish address? (circle one)    yes    no            Ok to publish phone #? (circle one)    yes    no  
Ok to publish email? (circle one)    yes    no            Ok to publish photo? (circle one)    yes    no

Religion \_\_\_\_\_

Baptismal Year \_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

First Communion Year \_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Confirmation Year \_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Married Year \_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_ OR n/a

Notes (special needs, unique talents, medical alerts, etc.) \_\_\_\_\_

**Please list ministries that adults in the household are currently involved in; list the name of the participating party next to the activity (example: Lector (Bill), Eucharistic Minister (Mary), etc.):**

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**LIST ALL CHILDREN IN FAMILY ON NEXT PAGE**

# Parish Re-Registration Form – Children In Family

*Children 26 years of age or older should be individually registered as their own family unit.*

## CHILD #1

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Nickname Known As or Goes By \_\_\_\_\_ Circle One male female

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ City of birth \_\_\_\_\_ State \_\_\_\_\_

Primary Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Circle One: landline cell

Personal E-Mail \_\_\_\_\_ @ \_\_\_\_\_

School \_\_\_\_\_ City \_\_\_\_\_

I prefer communication by (circle one) email text to cell phone both email & text

Ok to publish address? (circle one) yes no Ok to publish phone #? (circle one) yes no

Ok to publish email? (circle one) yes no Ok to publish photo? (circle one) yes no

Religion \_\_\_\_\_ Ethnicity \_\_\_\_\_

Baptismal Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

First Communion Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Confirmation Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Notes (special needs, unique talents, medical alerts, etc.) \_\_\_\_\_

## CHILD #2

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Nickname Known As or Goes By \_\_\_\_\_ Circle One male female

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ City of birth \_\_\_\_\_ State \_\_\_\_\_

Primary Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Circle One: landline cell

Personal E-Mail \_\_\_\_\_ @ \_\_\_\_\_

School \_\_\_\_\_ City \_\_\_\_\_

I prefer communication by (circle one) email text to cell phone both email & text

Ok to publish address? (circle one) yes no Ok to publish phone #? (circle one) yes no

Ok to publish email? (circle one) yes no Ok to publish photo? (circle one) yes no

Religion \_\_\_\_\_ Ethnicity \_\_\_\_\_

Baptismal Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

First Communion Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Confirmation Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Notes (special needs, unique talents, medical alerts, etc.) \_\_\_\_\_

**CHILD #3**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Nickname Known As or Goes By \_\_\_\_\_ Circle One male female

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ City of birth \_\_\_\_\_ State \_\_\_\_\_

Primary Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Circle One: landline cell

Personal E-Mail \_\_\_\_\_ @ \_\_\_\_\_

School \_\_\_\_\_ City \_\_\_\_\_

I prefer communication by (circle one) email text to cell phone both email & text

Ok to publish address? (circle one) yes no Ok to publish phone #? (circle one) yes no

Ok to publish email? (circle one) yes no Ok to publish photo? (circle one) yes no

Religion \_\_\_\_\_ Ethnicity \_\_\_\_\_

Baptismal Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

First Communion Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Confirmation Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Notes (special needs, unique talents, medical alerts, etc.) \_\_\_\_\_

**CHILD #4**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Nickname Known As or Goes By \_\_\_\_\_ Circle One male female

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ City of birth \_\_\_\_\_ State \_\_\_\_\_

Primary Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Circle One: landline cell

Personal E-Mail \_\_\_\_\_ @ \_\_\_\_\_

School \_\_\_\_\_ City \_\_\_\_\_

I prefer communication by (circle one) email text to cell phone both email & text

Ok to publish address? (circle one) yes no Ok to publish phone #? (circle one) yes no

Ok to publish email? (circle one) yes no Ok to publish photo? (circle one) yes no

Religion \_\_\_\_\_ Ethnicity \_\_\_\_\_

Baptismal Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

First Communion Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Confirmation Year \_\_\_\_\_ Church \_\_\_\_\_ City/State \_\_\_\_\_

Notes (special needs, unique talents, medical alerts, etc.) \_\_\_\_\_

***Please attach additional pages if more than four children in family.***