

PLEASE PRINT IN THE CLEAR BOXES

St. Thomas the Apostle Parish
Confidential Membership Information



For Office Use Only

Last Name for Filing

Date Entered in Database

By Whom

Today's Date

Name of parish where currently registered?

Send Offertory Envelopes?

Please tell us how to contact you:

Address	Street			Apartment/Unit	City	State	Zip Code
Phone, Email	Area Code	Phone Number	Unlisted?	Language Used at Home	Email Address		

Please tell us about all persons now living in your household who are not registered separately with the parish:

Head of Household (Select Any Person)									
Mr., Ms. Mrs., etc. ↓	First Name	Nick-name	Mid. Init.	Last Name	Jr., Sr., PhD., etc. ↓	Profession or Occupation	Retired? (Yes/No) ↓	Daytime Phone, if not at home	
								Area Code	Phone Number
Male or Female (M/F) ↓	Date of Birth	Never Married, Married, Divorced, etc. ↓	Maiden Name	Religion	Baptized? (Yes/ No) ↓	First Communion? (Yes/ No) ↓	Confirmed? (Yes/ No) ↓	Date of Latest Marriage	Catholic Marriage? (Yes/No) ↓

Person 2: Relationship to Head of Household (Spouse, Child, Fiancé, In-Law, etc.) →→→									
Mr., Ms. Mrs., etc. ↓	First Name	Nick-name	Mid. Init.	Last Name	Jr., Sr., PhD., etc. ↓	Profession or Occupation	Retired? (Yes/No) ↓	Daytime Phone, if not at home	
								Area Code	Phone Number
Male or Female (M/F) ↓	Date of Birth	Never Married, Married, Divorced, etc. ↓	Maiden Name	Religion	Baptized? (Yes/ No) ↓	First Communion? (Yes/ No) ↓	Confirmed? (Yes/ No) ↓	Date of Latest Marriage	Catholic Marriage? (Yes/No) ↓

Please use the back of the form to add more persons →→→

Person 3: Relationship to Head of Household (Spouse, Child, Fiancé, In-Law, etc.) →→→										
Mr., Ms. Mrs., etc. ↓	First Name	Nick- name	Mid. Init.	Last Name		Jr., Sr., PhD., etc. ↓	Profession or Occupation	Retired? (Yes/No) ↓	Daytime Phone, if not at home	
									Area Code	Phone Number
Male or Female (M/F) ↓	Date of Birth	Never Married, Married, Divorced, etc. ↓		Maiden Name	Religion	Baptized? (Yes/ No) ↓	First Communion? (Yes/ No) ↓	Confirmed? (Yes/ No) ↓	Date of Latest Marriage	Catholic Marriage? (Yes/No) ↓

Person 4: Relationship to Head of Household (Spouse, Child, Fiancé, In-Law, etc.) →→→										
Mr., Ms. Mrs., etc. ↓	First Name	Nick- name	Mid. Init.	Last Name		Jr., Sr., PhD., etc. ↓	Profession or Occupation	Retired? (Yes/No) ↓	Daytime Phone, if not at home	
									Area Code	Phone Number
Male or Female (M/F) ↓	Date of Birth	Never Married, Married, Divorced, etc. ↓		Maiden Name	Religion	Baptized? (Yes/ No) ↓	First Communion? (Yes/ No) ↓	Confirmed? (Yes/ No) ↓	Date of Latest Marriage	Catholic Marriage? (Yes/No) ↓

Person 5: Relationship to Head of Household (Spouse, Child, Fiancé, In-Law, etc.) →→→										
Mr., Ms. Mrs., etc. ↓	First Name	Nick- name	Mid. Init.	Last Name		Jr., Sr., PhD., etc. ↓	Profession or Occupation	Retired? (Yes/No) ↓	Daytime Phone, if not at home	
									Area Code	Phone Number
Male or Female (M/F) ↓	Date of Birth	Never Married, Married, Divorced, etc. ↓		Maiden Name	Religion	Baptized? (Yes/ No) ↓	First Communion? (Yes/ No) ↓	Confirmed? (Yes/ No) ↓	Date of Latest Marriage	Catholic Marriage? (Yes/No) ↓

Please use a second form if you need to list additional persons.