

St. Therese of Lisieux Catholic Community

1- Household Information

(Please Print)

Date Registered _____

Envelope # (office will supply) _____

Family Name _____ Primary Phone # _____

(Last name, First name(s), Title)

Address _____ City _____ Zip Code _____ - _____

Primary Email _____ Previous Parish _____

Adult - Member Information

Adult - Member Information

First and Middle Name _____ Male or Female _____

Last Name (if different) _____ Maiden Name _____

Date of Birth _____ Religion _____

Occupation/Employer _____ / _____

Cell Phone # _____

Personal Email _____

Sacraments: Please list parish name and location if known:

Baptism: Parish _____ City _____

1st Communion: Parish _____ City _____

Confirmation: Parish _____ City _____

Matrimony: Parish _____ City _____

Marital Status: _____ Role _____
(single, married, divorced, widowed, etc.) (Head of Household, husband, wife, etc.)

Special Needs _____

Comments or questions _____

First and Middle Name _____ Male or Female _____

Last Name (if different) _____ Maiden Name _____

Date of Birth _____ Religion _____

Occupation/Employer _____ / _____

Cell Phone # _____

Personal Email _____

Sacraments: Please list parish name and location if known:

Baptism: Parish _____ City _____

1st Communion: Parish _____ City _____

Confirmation: Parish _____ City _____

Matrimony: Parish _____ City _____

Marital Status: _____ Role _____
(single, married, divorced, widowed, etc.) (Head of Household, husband, wife, etc.)

Special Needs _____

Comments or questions _____

See Back for Additional Information

Emergency contact name _____ Phone # _____ Relationship _____
(not same household)

Children Information (Note: Children living at home who are out of school and supporting themselves should register separately)

	Child 1	Child 2	Child 3	Child 4
First and Middle Name				
Last Name (If Different)				
Date of Birth				
School attending Current grade				
Baptism: Parish, City and Date				
First Eucharist: Parish, City and Date				
Reconciliation: Parish, City and Date				
Confirmation: Parish, City and Date				
Special Needs				
Other				