

**St. Thomas Aquinas Parish Family Registration**  
**1719 Post Rd., Fairfield, CT 06824**  
**(203) 255-1097**

Registration Date

Envelope # (For Office Use Only)

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**Household Information**

Last Name

First Name(s)

Mailing Name Header (Mr.,Mrs., Ms., Miss i.e. Mr. & Mrs. John & Jane Doe )

Mailing Address

City

State

Zip code

Home Phone Number (include area code)

Cell Phone Number (s) (include area code)

Emergency Contact Name and Phone Number

E-mail Address (Primary)

E-mail Address (Secondary if applicable)

Would you like to receive Envelopes from the Parish?

Yes

No

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## **Individual Member Information**

**Fill In Following That Is Applicable**

### **Male**

### **Female**

First Name

First Name & Maiden Name (if applicable)

Date of Birth (MM/DD/YYYY)

Date of Birth (MM/DD/YYYY)

E-mail (Individual)

E-mail (Individual)

Work Phone Number (include area code)

Work Phone Number (include area code)

Employer Name

Employer Name

### Sacraments Section (Please Check Yes or No and Fill in Dates if known)

Baptism:

Date:

Baptism:

Date:

Yes

Yes

No

No

Eucharist:

Date:

Eucharist:

Date:

Yes

Yes

No

No

Confirmation:

Date:

Confirmation:

Date:

Yes

Yes

No

No

Catholic  
Marriage:

Date:

Catholic  
Marriage:

Date:

Yes

Yes

No

No

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**Dependent Children Information**  
**Fill In Following That Is Applicable**

**Child #1:**

Relationship	First & Last Name	Date of Birth
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Baptism:	Date:
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Yes	No
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Eucharist:	Date:
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Yes	No
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Confirmation:	Date:
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Yes	No
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**Child #2:**

Relationship	First & Last Name	Date of Birth
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Baptism:	Date:
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Yes	No
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Eucharist:	Date:
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Yes	No
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Confirmation:	Date:
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Yes	No
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**Child #3:**

Relationship	First & Last Name	Date of Birth
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Baptism:	Date:
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Yes	No
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Eucharist:	Date:
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Yes	No
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Confirmation:  
Yes No

Date:

**Child #4:**

Relationship

First & Last Name

Date of Birth

Baptism:  
Yes No

Date:

Eucharist:  
Yes No

Date:

Confirmation:  
Yes No

Date:

**Child #5:**

Relationship

First & Last Name

Date of Birth

Baptism:  
Yes No

Date:

Eucharist:  
Yes No

Date:

Confirmation:  
Yes No

Date: