

# St. Thomas Aquinas Catholic Church

**Parish Registration Form**  
 1008 W. 37<sup>th</sup> Street  
 Baltimore, MD 21211  
 Phone: 410-366-4488  
 thomasaquinas@archbalt.org  
 http://aquinasbmore.org

## Family Contact Information

Today's Date: \_\_\_\_\_

**\* We encourage parishioners age 21 or over to fill out their own personal parish registration form.**

Family Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  Listed  Unlisted

Street Address: \_\_\_\_\_ Family E-mail: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Family Member Information

**Please list only family members who are currently living at the street address listed above.**

Indicate Sacraments Received  
in the Catholic Church

Family Member Names	Gender (M/F)	Birth Date (mm/dd/yy)	Religion	Marital Status (Single, Married, Divorced, Widowed)	Occupation	E-mail	Cell Phone (Circle any number below you wish unlisted in our records.)	Baptism	1 <sup>st</sup> Eucharist	Confirmation
Male/Husband		/ /						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Female/Wife (If wife, first & maiden Name)		/ /						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Child <input type="checkbox"/> Other (check box)		/ /						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Child <input type="checkbox"/> Other (check box)		/ /						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Child <input type="checkbox"/> Other (check box)		/ /						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Child <input type="checkbox"/> Other (check box)		/ /						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Child <input type="checkbox"/> Other (check box)		/ /						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Child <input type="checkbox"/> Other (check box)		/ /						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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