


(FOR OFFICE USE ONLY)

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Welcome:  E-mailed  Mailed

 Env. Registration:  Yes  No



**ST. THOMAS MORE CHURCH • 51 MARKETPLACE • IRVINE • CA 92602 • 949-551-8601**

## PARISH REGISTRATION FORM

RETURN COMPLETED FORM TO THE CHURCH OFFICE OR EMAIL TO [MAGGY@STMIRVINE.ORG](mailto:MAGGY@STMIRVINE.ORG)

(PLEASE PRINT CLEARLY)

FAMILY NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET CITY STATE/ZIP CODE

PHONE: (Preferred) (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ EMAIL: (Preferred) \_\_\_\_\_

We encourage you to consider signing up for our electronic giving program. We accept donations made from your bank account, credit card or debit card. It takes just a few minutes to set up a recurring giving plan. Ask to be set up today or to learn more, visit the church website: [www.stmirvine.org](http://www.stmirvine.org), locate the "E-GIVING" link and complete the form. We thank you for supporting our mission!

Please send me offering envelopes:  Yes  No

HEAD OF HOUSEHOLD (First) \_\_\_\_\_ (Last) \_\_\_\_\_  MALE  FEMALE

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

CELL PHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ EMAIL: \_\_\_\_\_

MARITAL STATUS:  SINGLE  MARRIED  DIVORCED  SEPARATED  WIDOWED

RELIGION \_\_\_\_\_

### CATHOLIC SACRAMENTS RECEIVED

LANGUAGE \_\_\_\_\_ BAPTISM  Yes  No DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

EDUCATION \_\_\_\_\_ RECONCILIATION  Yes  No DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

OCCUPATION \_\_\_\_\_ FIRST COMMUNION  Yes  No DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

SPECIAL NEEDS DETAILS \_\_\_\_\_ CONFIRMATION  Yes  No DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_ MARRIAGE  Yes  No DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

SPOUSE (First) \_\_\_\_\_ (Last) \_\_\_\_\_  MALE  FEMALE

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

CELL PHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ EMAIL: \_\_\_\_\_

MARITAL STATUS:  SINGLE  MARRIED  DIVORCED  SEPARATED  WIDOWED

RELIGION \_\_\_\_\_

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EDUCATION \_\_\_\_\_ RECONCILIATION  Yes  No DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

OCCUPATION \_\_\_\_\_ FIRST COMMUNION  Yes  No DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

SPECIAL NEEDS DETAILS \_\_\_\_\_ CONFIRMATION  Yes  No DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_ MARRIAGE  Yes  No DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

CONTINUE TO NEXT PAGE FOR ADDITIONAL FAMILY MEMBERS

# FAMILY INFORMATION

NAME: \_\_\_\_\_  MALE  FEMALE  
First Middle Last

DOB: \_\_\_/\_\_\_/\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

SON \_\_\_ DAUGHTER \_\_\_ OTHER \_\_\_\_\_

RELIGION \_\_\_\_\_

### CATHOLIC SACRAMENTS RECEIVED

LANGUAGE \_\_\_\_\_

BAPTISM  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_

GRADE \_\_\_\_\_

RECONCILIATION  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_

SPECIAL NEEDS DETAILS \_\_\_\_\_

FIRST COMMUNION  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_

\_\_\_\_\_

CONFIRMATION  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_

\_\_\_\_\_

MARRIAGE  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_

NAME: \_\_\_\_\_  MALE  FEMALE  
First Middle Last

DOB: \_\_\_/\_\_\_/\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

SON \_\_\_ DAUGHTER \_\_\_ OTHER \_\_\_\_\_

RELIGION \_\_\_\_\_

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LANGUAGE \_\_\_\_\_

BAPTISM  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_

GRADE \_\_\_\_\_

RECONCILIATION  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_

SPECIAL NEEDS DETAILS \_\_\_\_\_

FIRST COMMUNION  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_

\_\_\_\_\_

CONFIRMATION  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_

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MARRIAGE  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_

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RELIGION \_\_\_\_\_

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SPECIAL NEEDS DETAILS \_\_\_\_\_

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CONFIRMATION  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_

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MARRIAGE  Yes  No DATE: \_\_\_/\_\_\_/\_\_\_