(FOR OFFICE USE ONLY)						
Envelope/ID No						
Entered by: D	ate:					
Welcome: $\square$ E-mailed	l 🔲 Mailed					
<b>\$</b> 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

(PLEASE PRINT CLEARLY)

	, =====================================		
FAMILY NAME:		DATE:	
ADDRESS:			
STREET	CITY	S	STATE/ZIP CODE
<b>PHONE</b> : (Preferred) ()	<b>EMAIL:</b> (Preferred	)	
We encourage you to consider signing up for or or debit card. It takes just a few minutes to set <a href="https://www.stmirvine.org">www.stmirvine.org</a> , locate the "E-GIVING" link  Please send me offering envelopes: ☐ Yes	up a recurring giving plan. Ask to be	set up today or to learn mo	ore, visit the church website:
HEAD OF HOUSEHOLD (First)	(Last)		☐ MALE ☐ FEMALE
DOB:/	PLACE OF BIRTH:		
CELL PHONE: ()	EMAIL:		
MARITAL STATUS: ☐ SINGLE	☐ MARRIED ☐ DIVORCED	☐ SEPARATED	☐ WIDOWED
RELIGION		<b>CATHOLIC SACRAME</b>	NTS RECEIVED
LANGUAGE	BAPTISM	☐ Yes ☐ No DATE:	
EDUCATION		☐ Yes ☐ No DATE:	
OCCUPATION		☐ Yes ☐ No DATE:	//
SPECIAL NEEDS DETAILS	CONFIRMATION	☐ Yes ☐ No DATE:	//
	MARRIAGE	☐ Yes ☐ No DATE:	//
SPOUSE (First)	(Last)		☐ MALE ☐ FEMALE
DOB:/			
CELL PHONE: ()			
MARITAL STATUS: ☐ SINGLE	☐ MARRIED ☐ DIVORCED	☐ SEPARATED	☐ WIDOWED
RELIGION		<b>CATHOLIC SACRAME</b>	NTS 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:	/

	<u>FA</u>	MILY INFORMATI	<u>ON</u>			
NAME:					☐ MALE ☐ FEMALE	
First	Middle	Las	st		_	
DOB:/	PLACE OF BIRTH:					
SON DAUGHTER	OTHER					
RELIGION		CATHOLIC SACRAMENTS RECEIVED				
LANGUAGE		BAPTISM	☐ Yes	□ No	DATE://	
GRADE		RECONCILIATION	☐ Yes		DATE:/	
SPECIAL NEEDS DETAILS		FIRST COMMUNION	☐ Yes	□ No	DATE://	
		CONFIRMATION	☐ Yes	□ No	DATE://	
		MARRIAGE	☐ Yes	□ No	DATE://	
NAME:					_	
First	Middle	Las	•			
DOB:/	PLACE OF BIRTH:					
SON DAUGHTER	OTHER					
RELIGION		CATHO	DLIC SACRA	AMENTS F	RECEIVED	
LANGUAGE		BAPTISM	☐ Yes	□ No	DATE://	
GRADE		RECONCILIATION	☐ Yes		DATE:/	
SPECIAL NEEDS DETAILS		FIRST COMMUNION	☐ Yes	□ No	DATE://	
		CONFIRMATION	☐ Yes	□ No	DATE://	
		MARRIAGE	☐ Yes	□ No	DATE://	
NAME:	Middle	Loc			_	
First	Middle	Las			_	
DOB:/	PLACE OF BIRTH:				_	
DOB:/	PLACE OF BIRTH:					
DOB:/ SON DAUGHTER RELIGION	PLACE OF BIRTH:	CATHO	OLIC SACRA	AMENTS F	RECEIVED	
DOB:/  SON DAUGHTER  RELIGION  LANGUAGE	PLACE OF BIRTH: OTHER	<b>CATHO</b> BAPTISM	DLIC SACRA	AMENTS F	RECEIVED  DATE://	
DOB:/SON DAUGHTER RELIGION LANGUAGE GRADE	PLACE OF BIRTH:	CATHO BAPTISM RECONCILIATION	DLIC SACRA	AMENTS F	PRECEIVED  DATE://	
DOB:/  SON DAUGHTER  RELIGION  LANGUAGE	PLACE OF BIRTH:	CATHO BAPTISM RECONCILIATION FIRST COMMUNION	DLIC SACRA  Yes  Yes  Yes	AMENTS F  No No No	DATE:/	
DOB:/SON DAUGHTER RELIGION LANGUAGE GRADE	PLACE OF BIRTH:	CATHO BAPTISM RECONCILIATION FIRST COMMUNION CONFIRMATION	DLIC SACRA  Yes  Yes  Yes  Yes  Yes	AMENTS F  No No No No	RECEIVED         DATE://         DATE://         DATE://         DATE://	
DOB:/SON DAUGHTER RELIGION LANGUAGE GRADE	PLACE OF BIRTH:	CATHO BAPTISM RECONCILIATION FIRST COMMUNION	DLIC SACRA  Yes  Yes  Yes	AMENTS F  No No No	DATE:/	
DOB:/  SON DAUGHTER  RELIGION  LANGUAGE  GRADE  SPECIAL NEEDS DETAILS  NAME:	PLACE OF BIRTH:	CATHO BAPTISM RECONCILIATION FIRST COMMUNION CONFIRMATION	DLIC SACRA  Yes  Yes  Yes  Yes  Yes	AMENTS F  No No No No	RECEIVED         DATE://         DATE://         DATE://         DATE://	
First  DOB:/  SON DAUGHTER  RELIGION  LANGUAGE  GRADE  SPECIAL NEEDS DETAILS	PLACE OF BIRTH:	EATHO BAPTISM RECONCILIATION FIRST COMMUNION CONFIRMATION	DLIC SACRA  Yes  Yes  Yes  Yes  Yes  Yes	AMENTS F  No No No No	RECEIVED         DATE:      /	
DOB:/  SON DAUGHTER  RELIGION  LANGUAGE  GRADE  SPECIAL NEEDS DETAILS  NAME:	PLACE OF BIRTH:  OTHER  Middle	EATHO BAPTISM RECONCILIATION FIRST COMMUNION CONFIRMATION MARRIAGE	DLIC SACRA  Yes  Yes  Yes  Yes  Yes  Yes  St	AMENTS F  No No No No	RECEIVED         DATE:      /	
DOB:/SON DAUGHTER RELIGION LANGUAGE GRADE SPECIAL NEEDS DETAILS NAME: First	PLACE OF BIRTH:  OTHER  Middle  PLACE OF BIRTH:	EATHO BAPTISM RECONCILIATION FIRST COMMUNION CONFIRMATION MARRIAGE	DLIC SACRA  Yes  Yes  Yes  Yes  Yes  Yes	AMENTS F  No No No No	RECEIVED         DATE:      /	
DOB: First  DOB:	PLACE OF BIRTH: OTHER  Middle PLACE OF BIRTH: OTHER	EATHO BAPTISM RECONCILIATION FIRST COMMUNION CONFIRMATION MARRIAGE	DLIC SACRA  Yes  Yes  Yes  Yes  Yes  Yes	AMENTS F  No No No No No	DATE:/	
SON DAUGHTER  RELIGION LANGUAGE GRADE SPECIAL NEEDS DETAILS  NAME: First  DOB: / SON DAUGHTER	PLACE OF BIRTH: OTHER  Middle PLACE OF BIRTH: OTHER	EATHO BAPTISM RECONCILIATION FIRST COMMUNION CONFIRMATION MARRIAGE	DLIC SACRA  Yes  Yes  Yes  Yes  Yes  Yes	AMENTS F	DATE:/	
Pirst  DOB:/  SON DAUGHTER  RELIGION  LANGUAGE  GRADE  SPECIAL NEEDS DETAILS  NAME:  First  DOB:/  SON DAUGHTER  RELIGION	PLACE OF BIRTH: OTHER  Middle PLACE OF BIRTH: OTHER	EATHO BAPTISM RECONCILIATION FIRST COMMUNION CONFIRMATION MARRIAGE	DLIC SACRA  Yes  Yes  Yes  Yes  Yes  DYes	AMENTS F	DATE:/   DATE://	
First  DOB:/  SON DAUGHTER  RELIGION  LANGUAGE  GRADE  SPECIAL NEEDS DETAILS  NAME:  First  DOB:/  SON DAUGHTER  RELIGION  LANGUAGE	PLACE OF BIRTH: OTHER  Middle PLACE OF BIRTH: OTHER	CATHO BAPTISM RECONCILIATION FIRST COMMUNION CONFIRMATION MARRIAGE  Las  CATHO BAPTISM	Yes Yes Yes Yes Yes Yes Yes Yes	AMENTS F  No No No No No	DATE:/     DATE:/     DATE:/     DATE:/     DATE:/     DATE:/     DATE:/     MALE	
NAME:  SON DAUGHTER  First  DOB:/  DAUGHTER  RELIGION  LANGUAGE  SPECIAL NEEDS DETAILS  First  DOB:/  SON DAUGHTER  RELIGION  LANGUAGE  GRADE	PLACE OF BIRTH: OTHER  Middle PLACE OF BIRTH: OTHER	CATHO BAPTISM RECONCILIATION FIRST COMMUNION CONFIRMATION MARRIAGE  Las  CATHO BAPTISM RECONCILIATION	DLIC SACRA  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Ye	AMENTS F  No No No No No No No	RECEIVED  DATE:/  DATE:/  DATE:/  DATE:/  MALE	
NAME:  SON DAUGHTER  First  DOB:/  DAUGHTER  RELIGION  LANGUAGE  SPECIAL NEEDS DETAILS  First  DOB:/  SON DAUGHTER  RELIGION  LANGUAGE  GRADE	PLACE OF BIRTH: OTHER  Middle PLACE OF BIRTH: OTHER	CATHO BAPTISM RECONCILIATION FIRST COMMUNION CONFIRMATION MARRIAGE  Las  CATHO BAPTISM RECONCILIATION FIRST COMMUNION	Yes	AMENTS F  No No No No No No No	DATE:/   DATE:/	