



Received Pledge Card  
Received Time & Talent  
Above for office use only.

305 S. First Street | Waterford, WI 53185 | 262-534-2255 | starectory@saintthomaswaterford.org

### Parishioner Registration Form

Family Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_  
Email Address(s): \_\_\_\_\_

Head of Household / Spouse Status:    Single    Single w/Children    Married, Date: \_\_\_\_\_ Place: \_\_\_\_\_ with Children    Religious Order

**Please complete the following for each family member living in your home. More space is available on reverse side.**

<u>Family Members in Household</u> First & Middle Names (Indicate Last name if different)	<u>Sex</u> M/F	<u>Birth Date</u> MM/DD/YYYY	<u>Baptism</u> Y/N Date & Place	<u>First Communion</u> Y/N Date & Place	<u>Confirmation</u> Y/N Date & Place	<u>Relationship to HOH/Spouse</u> Child/Foster Child, Grandchild, Friend Niece/Nephew etc.	<u>Religion</u>	<u>Occupation</u>
Head of Household (HOH)								
Spouse Name (Maiden Name)								

7 U First & Middle Names (Indicate Last name if different)	o M/F	" ) MM/DD/YYYY	" Y/N Date & Place	7 # Y/N Date & Place	# Y/N Date & Place	Relationship to HOH/Spouse Child/Foster Child, Grandchild, Friend Niece/Nephew etc.	k	\

Please list any committees, ministries or groups within the parish that you are interested in learning more about.

How did you hear about us?