

ID# \_\_\_\_\_

# ST. THERESE OF JESUS CATHOLIC CHURCH

Date Received \_\_\_\_\_

271 N Farnsworth Avenue  
Aurora, IL 60505

FAMILY LAST NAME: \_\_\_\_\_

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

PHONE #1 \_\_\_\_\_ PHONE #2 \_\_\_\_\_

E-MAIL #1 \_\_\_\_\_ E-MAIL #2 \_\_\_\_\_

MR  \_\_\_\_\_, \_\_\_\_\_  
LAST NAME FIRST NAME

MARITAL STATUS: Married in Catholic Church  Civil Married  Never Married  Living with girlfriend  Divorced  Widower

OCCUPATION: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

MISS  \_\_\_\_\_, \_\_\_\_\_  
LAST NAME FIRST NAME

MARITAL STATUS: Married in Catholic Church  Civil Married  Never Married  Living with boyfriend  Divorced  Widower

OCCUPATION: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

## FAMILY INFORMATION OF ALL WHO LIVE IN YOUR HOUSE

FIRST & LAST NAME	GENDER	BIRTH DATE	BAPTIZED	FIRST COMMUION	CONFIRMATION
_____	F/M	____/____/____	Y/N	Y/N	Y/N
_____	F/M	____/____/____	Y/N	Y/N	Y/N
_____	F/M	____/____/____	Y/N	Y/N	Y/N
_____	F/M	____/____/____	Y/N	Y/N	Y/N
_____	F/M	____/____/____	Y/N	Y/N	Y/N
_____	F/M	____/____/____	Y/N	Y/N	Y/N

INTERESTED IN ON-LINE GIVING? Y/N REASON FOR REGISTRATION: SACRAMENTS  SCHOOL   
(mark which applies) NEW TO AREA  RE

NOTES: \_\_\_\_\_