

## REGISTRATION FOR ST TERESA OF AVILA PARISH

Please fill in the information below to the best of your knowledge, place in the collection basket, drop off, or mail to the rectory at PO Box 168, Akron, NY 14001 and you will be registered. Envelopes are mailed every two months. We will send temporaries out to you until these are available.

**Family Name:** \_\_\_\_\_

Street Address \_\_\_\_\_

City/Town \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ (Home) \_\_\_\_\_ (Cell)

**Head of Household's First Name** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Religion: \_\_\_\_\_

Church Where Baptized: \_\_\_\_\_ Approximate Date: \_\_\_\_\_

Did you make First Eucharist? \_\_\_\_\_ Yes \_\_\_\_\_ No Occupation: \_\_\_\_\_

Confirmation? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Spouse's First Name:** \_\_\_\_\_ Maiden Name \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Religion: \_\_\_\_\_

Church Where Baptized: \_\_\_\_\_ Approximate Date: \_\_\_\_\_

Did you make First Eucharist? \_\_\_\_\_ Yes \_\_\_\_\_ No Occupation: \_\_\_\_\_

Confirmation? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Marital Status:** \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Separated  
\_\_\_\_\_ Divorced \_\_\_\_\_ Widowed

If married, was this a Catholic Church Marriage? \_\_\_\_\_ Yes \_\_\_\_\_ No

Church \_\_\_\_\_

City, State \_\_\_\_\_ Date \_\_\_\_\_

**Child #1** \_\_\_\_\_

Date of Birth \_\_\_\_\_ Current Grade \_\_\_\_\_

Church Where Baptized \_\_\_\_\_ Date \_\_\_\_\_

Did you make First Eucharist? \_\_\_\_\_ Yes \_\_\_\_\_ No

Confirmation? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Child #2** \_\_\_\_\_

Date of Birth \_\_\_\_\_ Current Grade \_\_\_\_\_

Church Where Baptized \_\_\_\_\_ Date \_\_\_\_\_

Did you make First Eucharist? \_\_\_\_\_ Yes \_\_\_\_\_ No

Confirmation? \_\_\_\_\_ Yes \_\_\_\_\_ No