



St. Thomas the Apostle Church

A Roman Catholic Faith Community
60 Byrd Avenue, Bloomfield, NJ 07003
Phone Number: 973-338-9190
Facsimile Number: 973-338-4224

Website:

<https://www.stachurchbloomfield.com/web>

Facebook:

<https://www.facebook.com/stachurchbloomfield>

Twitter:

<https://twitter.com/stachurchnj>

CONFIDENTIAL

SAINT THOMAS THE APOSTLE ROMAN CATHOLIC CHURCH

BLOOMFIELD, NEW JERSEY

Date of Registration ____ / ____ / ____ ID Number _____
(Office use)

(please print)

Family Name _____

Address _____

Apt. No. _____

City _____ New Jersey Zip _____

Mailing address (if different from above)

Home Phone _____

Email _____

Does your family occasionally attend another Church? _____

Church name

<p><i>PLEASE PRINT</i></p> <p>Names of all members on lines below. Print last name if different. Print Maiden name and last name, if married.</p> <p>First Name Middle or Maiden Last Name</p>	Marital Status	If Married is the Marriage Recognized by the Catholic Church?	Religion	Handicap	Language	Occupation	Location	Work Phone
	1. Single 2. Married 3. Widowed 4. Separated 5. Divorced 6. Divorced and Remarried (please circle one number below)		Enter C if Catholic If not Catholic Please identify specific Religion	If this Person has any handicap condition, Please Identify	Spoken other than English		Business or School if student	
Heads of Household								
	1 2 3 4 5 6	Y N						
	1 2 3 4 5 6	Y N						
Children living at home								
	1 2 3 4 5 6	Y N						
	1 2 3 4 5 6	Y N						
	1 2 3 4 5 6	Y N						
	1 2 3 4 5 6	Y N						
	1 2 3 4 5 6	Y N						
Other persons living at home, give relationship								
	1 2 3 4 5 6	Y N						
	1 2 3 4 5 6	Y N						

In an emergency, would you need help with:
 Baby sitting
 Transportation
 Home nursing care information
 Other _____

If you are a shut-in or handicapped, would you like:
 Sacraments in the home
 Transportation to Church
 Someone to assist you
 Other _____

Grade If in school, Present Grade, K thru 16 or highest degree	Sex	Nationality	Date of Birth M/D/Y	Baptism Has this person ever been Baptized Catholic or received into the Catholic Church?	First Communion	First Penance	Confirmation	Marriage Date M/D/Y	Mass Attendance Daily Weekly Occasional Never Shut-in (Please circle letter below)	Do Children who attend Non-Catholic Schools, regularly attend our Parish Religious Education Programs?	E – Mail address / Cell Phone
	M			Y	Y	Y	Y		D W O	Y	
	F			N	N	N	N		N S	N	
	M			Y	Y	Y	Y		D W O	Y	
	F			N	N	N	N		N S	N	
	M			Y	Y	Y	Y		D W O	Y	
	F			N	N	N	N		N S	N	
	M			Y	Y	Y	Y		D W O	Y	
	F			N	N	N	N		N S	N	
	M			Y	Y	Y	Y		D W O	Y	
	F			N	N	N	N		N S	N	
	M			Y	Y	Y	Y		D W O	Y	
	F			N	N	N	N		N S	N	
	M			Y	Y	Y	Y		D W O	Y	
	F			N	N	N	N		N S	N	
	M			Y	Y	Y	Y		D W O	Y	
	F			N	N	N	N		N S	N	

What aids to spiritual growth would you like to have offered by our Parish?

Other Comments:
