

**BLESSED TRINITY PARISH REGISTRATION FORM**  
*Stewardship – Our Way of Life!*

Family Last Name \_\_\_\_\_ Registration Date \_\_\_\_\_  
 Street Address \_\_\_\_\_ Home Phone \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Head of Household – First Name \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Occupation/Workplace \_\_\_\_\_ Email \_\_\_\_\_  
 Spouse – First Name \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Occupation/Workplace \_\_\_\_\_ Email \_\_\_\_\_

***Please fill out information below for each household member:***

First Name	Marital Status	Sex	D.O.B.	Religion	Language Spoken at Home	Name of School/Current Grade
<b>ADULTS</b>						
<b>CHILDREN</b>						

Please return this form to the Parish Office.

**Thank you, and**  
**Welcome to our Family!**

**FILE NUMBER  
 (FOR OFFICE USE ONLY)**