

DIOCESE OF TYLER
Family Registration Form

ST. ANDREW the APOSTLE CATHOLIC CHURCH
1611 Feagin • Lufkin Texas 75904

FOR OFFICE USE ONLY
ID #: _____
Input by: _____
Date: _____

Date: _____ Which Mass will your family usually attend? Sat., 5 pm Sun., 8:30 am (Span.) Sun., 10:30 am Sun., 12:30 pm (Span.)

Would you like to receive offering envelopes? YES NO Would you like to receive "Catholic East Texas" magazine? YES NO

1. Household of: _____
Last Name First Middle

2. Spouse: _____
Last Name First Middle

Address: _____
Street/PO Box City State Zip

Maiden Name: _____

Phone: _____ (h) _____ (cell) E-Mail: _____

Cell Phone: _____ E-Mail: _____

Status: *Single Cohabiting Married Widowed*
Separated Divorced Divorced & Remarried w/o Annulment

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Separated Divorced Divorced & Remarried w/o Annulment

Ethnicity: *Anglo Black Hispanic Asian Other:* _____

Ethnicity: *Anglo Black Hispanic Asian Other:* _____

Religion: *Catholic Other:* _____

Religion: *Catholic Other:* _____

Occupation: _____ Work Phone: _____

Occupation: _____ Work Phone: _____

Birthday: _____

Birthday: _____

Sacraments received:

Sacraments received:

Baptism: YES NO First Communion: YES NO

Baptism: YES NO First Communion: YES NO

Confirmation: YES NO Matrimony by Court: YES NO

Confirmation: YES NO Matrimony by Court: YES NO

Married in accord with the law of the Catholic Church? YES NO

Married in accord with the law of the Catholic Church? YES NO

Date Location Name of Church
By: *Priest/Deacon Minister Other:* _____

Date Location Name of Church
By: *Priest/Deacon Minister Other:* _____

Languages spoken: *English Spanish Other:* _____

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What areas of your church would you like to have more information about? Please indicate by **number**, which person(s), wish to receive which information. Remember it takes *all* of us working *together* to build up the Church.

Music: Instrumental ____, Adult Choir ____, Song Leader ____, **Religious Education:** Catechists ____, Substitute Catechists ____, RICA: Sponsor ____,
Vacation Bible School ____, Adult Bible Study: Facilitator ____, Participant ____, **Organizations:** Ladies Guild ____, Knight of Columbus ____,
Rosary Group ____, St. Andrew Charity ____, Respect Life Ministry ____, **Liturgical Ministry:** Extra-Ordinary Minister of Communion ____,
Usher/Greeter ____, Lector ____, Altar Server ____, Audio Visual ____, **Youth Leaders:** Assist with youth group ____, **Committees:** Fundraising ____,
Grounds Crew ____, Bookstore/Gift Shop ____, Sacristy Cleaning ____, Hospitality ____, Liturgy ____

Please complete information/needs concerning children and other persons living in your home on reverse side.

Other Persons Living in the Home

Last Name <i>(If different)</i>	First	Middle	Gender	Birthday	Relationship to Head of Household	Ethnicity	School Attending	Grade	Baptized	First Communion	Confirmed	Age
3. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												
4. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												
5. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												
6. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												
7. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												
8. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												
9. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												
10. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												
11. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												
12. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												
13. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												
14. _____			M F	___/___/___	_____	_____	_____	_____	Yes/No	Yes/No	Yes/No	___
<i>Comments:</i> _____												

Use comment lines for e-mail addresses, special interests, hobbies, talents and/or special needs for each person.