

St. Thomas More Church
2101 Pottstown Pike
South Coventry Twp., Chester Co.
Pottstown, PA 19465

Registration Form

Date: _____

Family (Last) Name: _____

Mailing Address: _____

Post Office: _____ Zip Code: _____

Actual Address: _____

Township: _____ County: _____

Phone Number: _____ Email Address: _____

Marital Status: Married Single Widowed Separated Divorced Divorced & Remarried

Place of Marriage: (Church) _____ City & State: _____

Date of Marriage: _____ Marriage Recognized by the Catholic Church: (Yes or No)

If widowed, name of spouse and date of death: _____

People actually living in the home (including college students). Use other side if necessary.

First Name: (Head of Household) _____

Date of Birth: _____

Occupation: _____

Religion: _____

Baptism (Yes or No) 1st Communion (Yes or No)

Confirmation (Yes or No)

Church activities you participate in: _____

Spouse: (First & Maiden) _____

Date of Birth: _____

Occupation: _____

Religion: _____

Baptism (Yes or No) 1st Communion (Yes or No)

Confirmation (Yes or No)

Church activities you participate in: _____

Name: _____

Date of Birth: _____

Occupation: _____

Religion: _____

Baptism (Yes or No) 1st Communion (Yes or No)

Confirmation (Yes or No)

Occupation, School, CCD, Grade: (as applicable) _____

Church activities you participate in: _____

Name: _____

Date of Birth: _____

Occupation: _____

Religion: _____

Baptism (Yes or No) 1st Communion (Yes or No)

Confirmation (Yes or No)

Occupation, School, CCD, Grade: (as applicable) _____

Church activities you participate in: _____

Church activities family members may be interested in:

Name: _____ Activity: _____

Name: _____ Activity: _____

Name: _____ Activity: _____

Name: _____ Activity: _____