

**Saint Thomas More Church, Manalapan  
Our Lady of Mercy Church, Englishtown  
Parish Registration Form**

Office Use Only  
# \_\_\_\_\_

We welcome anyone living within the parish boundary to register as a parishioner. Please contact the Parish office at 732-446-6661 with specific questions regarding the parish boundary.

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone#: \_\_\_\_\_ email: \_\_\_\_\_

Head of Household: \_\_\_\_\_ Sex: M ( ) or F ( )

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

Marital Status: Single ( ) Married ( ) Widowed ( ) Separated ( ) Divorced ( )

Married in Catholic Church: \_\_\_\_\_ Date: \_\_\_\_\_

Sacraments: (check those received) Baptism ( ) First Communion ( ) Confirmation ( )

Occupation: \_\_\_\_\_

Business Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Spouse: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

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

Sacraments: (check those received) Baptism ( ) First Communion ( ) Confirmation ( )

Occupation: \_\_\_\_\_

Business Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Child: \_\_\_\_\_ Sex: M ( ) F ( ) Date of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ School Grade: \_\_\_\_\_

Sacraments: (check those received) Baptism ( ) First Communion ( ) Confirmation ( )

Child: \_\_\_\_\_ Sex: M ( ) F ( ) Date of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ School Grade: \_\_\_\_\_

Sacraments: (check those received) Baptism ( ) First Communion ( ) Confirmation ( )

Child: \_\_\_\_\_ Sex: M ( ) F ( ) Date of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ School Grade: \_\_\_\_\_

Sacraments: (check those received) Baptism ( ) First Communion ( ) Confirmation ( )

Child: \_\_\_\_\_ Sex: M ( ) F ( ) Date of Birth: \_\_\_\_\_

Religion: \_\_\_\_\_ School Grade: \_\_\_\_\_

Sacraments: (check those received) Baptism ( ) First Communion ( ) Confirmation ( )