

Envelope #

Holy Trinity Catholic Church

Registration Form

8213 Linton Hall Road – Gainesville, VA 20155 – Phone: (703) 753-6700 Fax: (703) 753-6286

Last Name: _____ Title: Mr./Mrs. Mr. Mrs. Ms. Dr./Mrs. Dr. Address: _____

City: _____ State, Zip: _____ Subdivision: _____

If married, were you married in the Catholic Church by a Priest or Deacon: Yes / No Date of Marriage: _____ Home phone: _____

Mother's email: _____ Father's email: _____ Primary language: _____

First Name	Nick Name	DOB	Religion	Occupation	Employer	Phone Numbers	Sacraments	Marital Status
Husband / Single Male		/ / MM DD YY				Work: Cell:	___ Baptism ___ Confession ___ Communion ___ Confirmation	M / S / W / D
Wife / Single Female	nick name and maiden name	/ / MM DD YY				Work: Cell:	___ Baptism ___ Confession ___ Communion ___ Confirmation	M / S / W / D
Children at home	Nick Name	DOB	Gender	Religion	Education		Sacraments	
		/ / MM DD YY			___ Public School ___ Private School	___ Catholic School ___ Homeschool	___ Baptism ___ Confession	___ Communion ___ Confirmation
		/ / MM DD YY			___ Public School ___ Private School	___ Catholic School ___ Homeschool	___ Baptism ___ Confession	___ Communion ___ Confirmation
		/ / MM DD YY			___ Public School ___ Private School	___ Catholic School ___ Homeschool	___ Baptism ___ Confession	___ Communion ___ Confirmation
		/ / MM DD YY			___ Public School ___ Private School	___ Catholic School ___ Homeschool	___ Baptism ___ Confession	___ Communion ___ Confirmation
		/ / MM DD YY			___ Public School ___ Private School	___ Catholic School ___ Homeschool	___ Baptism ___ Confession	___ Communion ___ Confirmation
		/ / MM DD YY			___ Public School ___ Private School	___ Catholic School ___ Homeschool	___ Baptism ___ Confession	___ Communion ___ Confirmation
Others Residing at Address	Nick Name	DOB	Occupation	Cell Phone	Sacraments		Marital Status	Relationship to Household
		/ / MM DD YY			___ Baptism ___ Confession	___ Communion ___ Confirmation	M / S / W / D	
		/ / MM DD YY			___ Baptism ___ Confession	___ Communion ___ Confirmation	M / S / W / D	

Would you like to be contacted about any one of the following: Baptism, Confession, First Communion, Confirmation, RCIA, getting your marriage blessed in the Catholic Church? _____

Are your children registered in a religious education program (where)? _____