

PARISH REGISTRATION FORM

St. Philip the Apostle
 1897 W. Main Street
 Lewisville, TX 75067-3250
 972/436-9581



FOR OFFICE USE ONLY

Family Name: _____

Address: _____

City: _____ Zip (+4) _____

Home Telephone: (____) _____ - _____ Unlisted

E-mail Address: _____

Check if e-mail preferred to help parish "Go Green"

Name and Address of Former Parish _____

When did you move to the Flower Mound/Lewisville area? _____

REG DATE: _____

FAMILY ID: _____

WELCOME : _____

ENVELOPES: _____

Reactivation? Yes No

Former ID: _____

Your stewardship of time, talent and treasure at St. Philip the Apostle reflects your prayerful thanksgiving for the many blessings bestowed upon your family. As a parish family, 10% of the weekly offering is set aside to "tithe" to the needy of our community and other charitable organizations. Together, we can joyfully return a portion of our gifts to the Lord. For more information about time and talent look for our Newcomers booklet. To pledge your treasure to the operating Budget of our parish, please fill out the enclosed financial commitment card.

Offering envelopes are available for weekly or monthly donations. Do you prefer Weekly Monthly NO Envelopes You will receive no envelopes if you leave this blank. There is also a credit card option. These are done monthly on your Visa MC or Discover. Please use pledge cards and fill out your account information and signature on the back.

Bishop Vann has stated that all registered Catholics will receive the Ft Worth Diocese publication titled The North Texas Catholic. This is sent at no cost to you!

Information about You (Head of Household)			Information about your Spouse (If applicable)		
First Name:	Last Name:	Maiden Name: (if applicable)	First Name:	Last Name:	Maiden Name: (if applicable)
Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Other:			Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Other:		
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Engaged <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced			Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Engaged <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced		
Religion: <input type="checkbox"/> Catholic <input type="checkbox"/> Non-Catholic			Religion: <input type="checkbox"/> Catholic <input type="checkbox"/> Non-Catholic		
Primary Language Spoken:		Secondary Language Spoken:	Primary Language Spoken:		Secondary Language Spoken:
Occupation/Position:		Business Name:	Occupation/Position:		Business Name:
Work Phone: ()		Cell Phone ()	Work Phone: ()		Cell Phone: ()
Birthdate:		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Birthdate:		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female

Names of Others Residing at Home who will participate in the St. Philip community including College Students.	Relationship	Religion	Language	Grade/School/Employer	Birthdate	Sex

Important Notes:

1. A set number of spaces is available for the registrant's name and title.
2. Address changes can be done by completing the form in our bulletin, notating your address change on your offertory envelope with ADDRESS CHANGE noted, e-mail or calling in to the parish office.
3. Adult children and other relatives 25 years of age or older should fill out their own parish registration form

