

~ ST. ANNE'S CHURCH PARISH REGISTRATION FORM ~

Welcome to St. Anne's Church! We thank you for your decision to join St. Anne's parish community! In order that we may include you & your family in various parish activities and to ensure accurate parish records, we ask you to complete this registration form. Upon completion, please return it to the parish office (Monday thru Thursday, 8 a.m. to 3 p.m.):

St. Anne's Church; 299 Main Street, Gorham, ME 04038 or simply place it in the collection basket during Mass. Thank you and God bless you!

Today's Date: _____

Name:

<i>First Name</i>		<i>Middle Initial</i>	<i>Last Name</i>	
<i>Street Address</i>		<i>City</i>	<i>State</i>	<i>Zip Code</i>
<i>Day-Time Phone</i>	<i>Cell Phone</i>	<i>Best time to Call</i>		<i>E-mail Address</i>
<i>Date of Birth</i>		<i>Male</i> <input type="checkbox"/> <i>Female</i> <input type="checkbox"/>	<i>If female, what was your maiden name?</i>	
<i>Marital Status</i> <i>Single</i> <input type="checkbox"/>		<i>Married</i> <input type="checkbox"/> <i>Anniversary Date:</i>	<i>Separated</i> <input type="checkbox"/>	<i>Divorced</i> <input type="checkbox"/> <i>Widowed</i> <input type="checkbox"/>

<i>Employer Name:</i>	<i>Profession, Occupation, Trade or Skill:</i>
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Sacramental Information (Check all Sacraments Received):

<i>Baptism</i> <input type="checkbox"/>	<i>First Communion</i> <input type="checkbox"/>	<i>Confirmation</i> <input type="checkbox"/>	<i>Marriage</i> <input type="checkbox"/>
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Spouse (if applicable) or Other Adult Living in the Home

<i>First Name</i>		<i>Middle Initial</i>	<i>Last Name</i>	
<i>Day-time Phone</i>	<i>Cell Phone</i>	<i>Best time to Call</i>		<i>Email Address</i>
<i>Date of Birth</i>		<i>Male</i> <input type="checkbox"/> <i>Female</i> <input type="checkbox"/>	<i>If female, what was your maiden name – if applicable?</i>	

<i>Employer Name:</i>	<i>Profession, Occupation, Trade or Skill:</i>
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Sacramental Information (Check All Sacraments Received):

<i>Baptism</i> <input type="checkbox"/>	<i>First Communion</i> <input type="checkbox"/>	<i>Confirmation</i> <input type="checkbox"/>	<i>Marriage</i> <input type="checkbox"/>
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CHILDREN:

First Child Living With You:

<i>First Name</i>		<i>Middle Initial</i>	<i>Last Name</i>	
<i>Date of Birth</i>	<i>Male</i> <input type="checkbox"/> <i>Female</i> <input type="checkbox"/>	<i>Current Grade in School</i>	<i>Religion if not Catholic</i>	

Sacramental Information (Check All Sacraments Received):

<i>Baptism</i> <input type="checkbox"/>	<i>First Communion</i> <input type="checkbox"/>	<i>Confirmation</i> <input type="checkbox"/>	<i>Marriage</i> <input type="checkbox"/>
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Second Child Living With You:

<i>First Name</i>		<i>Middle Initial</i>	<i>Last Name</i>	
<i>Date of Birth</i>	<i>Male</i> <input type="checkbox"/> <i>Female</i> <input type="checkbox"/>	<i>Current Grade in School</i>	<i>Religion if not Catholic</i>	

Sacramental Information (Check All Sacraments Received):

<i>Baptism</i> <input type="checkbox"/>	<i>First Communion</i> <input type="checkbox"/>	<i>Confirmation</i> <input type="checkbox"/>	<i>Marriage</i> <input type="checkbox"/>
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Third Child Living With You:

<i>First Name</i>		<i>Middle Initial</i>	<i>Last Name</i>	
<i>Date of Birth</i>	<i>Male</i> <input type="checkbox"/> <i>Female</i> <input type="checkbox"/>	<i>Current Grade in School</i>	<i>Religion if not Catholic</i>	

Sacramental Information (Check All Sacraments Received):

<i>Baptism</i> <input type="checkbox"/>	<i>First Communion</i> <input type="checkbox"/>	<i>Confirmation</i> <input type="checkbox"/>	<i>Marriage</i> <input type="checkbox"/>
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Fourth Child Living With You:

<i>First Name</i>		<i>Middle Initial</i>	<i>Last Name</i>	
<i>Date of Birth</i>	<i>Male</i> <input type="checkbox"/> <i>Female</i> <input type="checkbox"/>	<i>Current Grade in School</i>	<i>Religion if not Catholic</i>	

Sacramental Information (Check All Sacraments Received):

<i>Baptism</i> <input type="checkbox"/>	<i>First Communion</i> <input type="checkbox"/>	<i>Confirmation</i> <input type="checkbox"/>	<i>Marriage</i> <input type="checkbox"/>
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Note: *If needed, please attach a separate sheet for additional children or other family members living with you such as grandparent, nephew, niece, cousin, etc.*

Note: *If you would like to share additional information, please let us know.*