St Anne Parish

Family Registration

Reg Date:

1321 Braman Ave, Bismarck, ND 58501 (701) 223-1549

Last Name: First Name(s):

Mailing Name (ie Mr. & Mrs. John Doe)

Address: Add2:

City: State: Zip:

AreaCode: Home Phone: Emerg. Phone:

Family Email: Env#

Individual Member Information

Parish Status: *(Active, Inactive)*		
Role: *(Head of House, Husband, Wife etc.)*		
First Name / Nickname:	/	/
Gender:	Male / Female (Maiden)	Male / Female (Maiden)
DOB (mm/dd/yyyy):	/ /	/ /
Email:		
Work Phone/Cell Phone:	/	/
First Language:		
Occupation/Employer:	/	/
Sacramental Info:	Baptized? Catholic?	Baptized? Catholic?
Dates (mm/dd/yyyy):	/ /	/ /
(Single, Married, Separated, Divorced, Annulled)	Reconcil? First Eucharist? Confirmed?	Reconcil? First Eucharist? Confirmed?
	/ / / / / /	/ / / / / /

Marital Status: Valid Catholic Marriage? Date of Marriage

Are there any members of your household who would like to be visited by a priest? Parish

Dependent Children Information

Relationship to Head of Household *(Son, Daughter, Mother Father etc.)*	First Name / Last Name	Gender	Birthdate & Birthplace	H.S. Grad Yr	School First Language
1.		M / F	/ /		
Check if Sacrament Received. Add Date if known.	Baptism *Catholic?* Eucharist Reconciliation Confirmation		/ / / / / / / /		
2.		M / F	/ /		
Check if Sacrament Received. Add Date if known.	Baptism *Catholic?* Eucharist Reconciliation Confirmation		/ / / / / / / /		
3.		M / F	/ /		
Check if Sacrament Received. Add Date if known.	Baptism *Catholic?* Eucharist Reconciliation Confirmation		/ / / / / / / /		

Please fill in all blank boxes and provide changes where necessary. If need to add additional members please use a second form.