

St. Ann Catholic Church

6712 El Paso Street, Bonners Ferry, OR 83805

OFFICE USE	
Date	
Env. No	
Mailing Stat	

PARISH REGISTRATION FORM

FAMILY LAST NAME:								
HEAD OF HOUSE HOLD NAME, (Last, first, Middle)								
ADDRESS:	RESS:					ZIP		
CONTACT; HOME PHONE:	CELLPHONE		E-MAIL					
MOVING HERE FROM, PARISH:		(CITY		STATE			
YEAR ROUND MEMBER: YES NO								
IF NOT YEAR ROUND, Mark the months you are here,	Jan Feb	Mar Apr	May Jun	Jul 🗌 🛮 Aug	Sep Oct	Nov Dec		
Your permanent address:								
MARITAL STATUS; Single Married D	AL STATUS; Single Married DateChurch/placeCity & state					& state		
Widow Divorced Separated Divorced Divor								
Remarried Date	ate Church/place			City & state				
DR SINGLE OR UNMARRIED:								
FAMILY DETAILS	DATE OF BIRTH (MM/DD/YY)	BAPTIZED YES/ NO	BAPTIZED church	1 ST COMM. YES/ NO	CONFIRMATION YES/ NO	OCCUPATION		
our full name (Last, first, Middle)								
PARENTS	RELIGION	CONTACT NO.			ADDRESS			
ather's name (Last, First)								
lother's name (Last, First)								

FAMILY LAST NAME FOR MARRIED/ WIDOWED/ DIVORCED/ REMARRIED:						DATE		
FAMILY DETAILS	DATE OF BIRTH (MM/DD/YY)	RELIGION	DATE OF MARRIAGE	BAPTIZED YES/ NO	1 ST COMM. YES/ NO	CONFIRMATION YES/ NO	OCCUPATION	
Husband's full name (Last, First, Middle)								
Wife's full name, with maiden name. (Last, First, Middle)								
		DATE OF BIRTH	DATE OF		YEAF	1ST	PRESENT	CONFIRMATION
CHILDREN'S/HOUSEHOLD FULL NAMES	RELATIONSHIP	(MM/DD/YY)	MARRIAGE	RELIG	ION BAPT		GRADE & SCHOOL	YES/ NO
1.(Last, First, Middle)								
2. (Last, First, Middle)								
3. (Last, First, Middle)								
4. (Last, First, Middle)								
5. (Last, First, Middle)								
6. (Last, First, Middle)								
7. (Last, First, Middle)								
If you need more space yo	ou may use a second form	n, make sure that y	you write the F	FAMILY LAST	NAME on the	second form as wel	II. Please attach a	ıll forms together.
Dear Parishioner, Thank you for joining ou volunteer opportunities in our parish.	r parish community.	You are welco	ome to par	ticipate in	parish acti	vities, ministries	s, organization	ns and
NAME OF THE HEAD OF THE HOUSEHOLD				SIGNA	TURE			_
DATE								