

Welcome to St. Anthony Mission Catholic Church!

Registrant's Initials: _____
Walk-In Registration Date: _____
Online registration? Y/N
Date received: _____

The following information will assist us in welcoming you and your family into our parish community.

FAMILY INFORMATION

Family Status (circle one): Single • Married • Cohabitation • Separated • Divorced • Widowed • Widower

Last Name Title(s) Head of Household First Name Spouse First Name

Primary Mailing Address (use alternate address for street address if different) City, State & Zip

Alternate Address (street or temporary) City, State & Zip

Part-year Resident? Y / N Months Away? _____ Use alternate address those months? Y / N

Phone Numbers: (home) _____ (work) _____ (cell) _____

Email: (home) _____ (work) _____

Preferences & Keywords:

1. Send email instead of mail when possible? Y / N
2. Would you like to receive The Catholic Miscellany? Y / N
(Weekly Diocesan Newspaper)
3. Will you use envelopes for offertory giving? Y / N

To: _____
Date: _____
Geographic Location: _____
Envelope #: _____

MEMBER INFORMATION (INCLUDING YOURSELF)

First Name Middle/Informal Name/Maiden Gender Birth date Employer/School Occupation/Grade

SACRAMENTS RECEIVED

(Please bring a copy of certificates for our files.)

First Name	Religion	Baptism	First Communion	Confirmation	Marriage
		Y/N Date: Church: Place:	Y/N Date: Church: Place:	Y/N Date: Church: Place:	By a priest? Y/N Date: Church: Place:
		Y / N Date: Church: Place:	Y/N Date: Church: Place:	Y/N Date: Church: Place:	By a priest? Y/N Date: Church: Place:
		Y / N Date: Church: Place:	Y/N Date: Church: Place:	Y/N Date: Church: Place:	By a priest? Y/N Date: Church: Place:
		Y / N Date: Church: Place:	Y/N Date: Church: Place:	Y/N Date: Church: Place:	By a priest? Y/N Date: Church: Place:
		Y / N Date: Church: Place:	Y/N Date: Church: Place:	Y/N Date: Church: Place:	By a priest? Y/N Date: Church: Place:

RELIGIOUS EDUCATION FOR MEMBER’S CHILDREN UP UNTIL GRADE 12

First Name	Parish School of Religion Grade	Comments

What ministries do you wish to serve in St. Anthony?

What kind of talents do you wish to share in Anthony?

Comments: _____

FOR OFFICE USE ONLY	
Keywords:	Talent / Ministry:
_____	_____
_____	_____
Date entered _____	Initials _____
NCM Notified _____	Initials _____