

St. Ann's Parish Registration and Stewardship Form

Family Name _____
 Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Cell Phone _____

Member

First Name _____ Nickname (optional) _____ Birthday _____
 Single _____ Married _____ Divorced _____ Widowed _____
 Married by (if applicable): Priest _____ Minister _____ Judge _____ Common Law _____
 Employer _____ Work Phone _____ Cell _____
 Job _____ Retired: Yes _____ No _____ Religion _____
 Baptized: Yes No First Communion: Yes _____ No _____ Confirmation: Yes _____ No _____
 If non-Catholic, do you attend Mass with your spouse? Yes _____ No _____

Spouse (if applicable)

First Name _____ Nickname (optional) _____ Birthday _____
 Employer _____ Work Phone _____ Cell _____
 Job _____ Retired: Yes _____ No _____ Religion _____
 Baptized: Yes _____ No _____ First Communion: Yes _____ No _____ Confirmation: Yes _____ No _____
 If non-Catholic, do you attend Mass with your spouse? Yes _____ No _____

Family

No. of Children _____ No. of Children Living at Home _____ Are you a single parent family? Yes _____ No _____
 Are there any elderly person(s) living in the home? Yes _____ No _____
 Person(s) Name _____
 Is the elderly person confined to the home? Yes _____ No _____ Do they need Pastoral Visits? Yes _____ No _____
 Communion Calls: Yes _____ Monthly _____ Quarterly _____ Yearly _____

Children - List only those living at home, mark sacraments received as Yes/No.

Name	Birthday	Baptism	Recon.	Eucharist	Confirm.	School	Grade

Our Family Stewardship Gift to St. Ann's will be \$ _____ and a gift of \$ _____ monthly to the Building and Maintenance Fund.