

St. Angela Merici | Parishioner Registration

We invite you to fill out this parish registration form. Please print clearly

Family Last Name: _____ Mailing Name: _____

e.g. Mr. & Mrs., Mr., Mrs., Ms., Dr.

Mailing Address: _____

Number Street

Apt.

City / Zip

Phone: _____

Home

Husband's Cell

Wife's Cell

Email: _____

Husband's Email Address

Wife's Email Address

Marital Status: Married Single Widow/Widower Separated Divorced

Contribution Type: Please choose either envelopes or on-line giving Envelopes.

Monthly Envelops

Weekly Envelops

On-Line Giving

Would you like to be listed in our guidebook? Yes No

Head of Household Information:

MALE

FEMALE

First Name: _____

Middle Name: _____

Maiden Name: _____

Date of Birth: _____

Place of Birth: _____

Occupation: _____

Place of
Employment: _____

Religion: _____

Date of Marriage: _____ Married by a Catholic Priest Deacon

- Over -

CHILDREN LIVING AT HOME:

Name: _____
Last *First* *Middle*

Sex: _____ Date of Birth: _____ Place of Birth: _____

Religion: _____

Name: _____
Last *First* *Middle*

Sex: _____ Date of Birth: _____ Place of Birth: _____

Religion: _____

Name: _____
Last *First* *Middle*

Sex: _____ Date of Birth: _____ Place of Birth: _____

Religion: _____

Name: _____
Last *First* *Middle*

Sex: _____ Date of Birth: _____ Place of Birth: _____

Religion: _____

OFFICE USE ONLY
Date Received: _____
Envelope #: _____
Entered By: _____