

Welcome to The Parish of Saint Anne

We invite you to form an ongoing relationship with Saint Anne Church by registering as a parishioner or parish family. All personal information will be kept confidential.



Please print all information.

PLEASE CHECK ONE OF THE FOLLOWING:

New Member Address/Info Change Remove Name/Address From Registry

ADULT 1

Dr. Mr. Mrs. Ms. Other _____

Full Name: _____

Male Female

Preferred First Name/Nickname: _____

Home Address: _____

City, State, Zip: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Date of Birth: (Month/Day/Year) ____ / ____ / ____

*Marital Status: _____

*Marriage Date: (Month/Day/Year) ____ / ____ / ____

*Current Occupation: _____

*Title: _____

*Company: _____

*Work Phone: _____

*Work Email Address: _____

*Would you be willing to share this work information with our St. Cajetan Ministry to grow the parish network of contacts for unemployed/underemployed? Yes _____ Not right now _____

*Language Spoken (other than English): _____

RELIGION

Catholic Protestant (specifically _____)

Jewish Muslim Other _____

SACRAMENTS RECEIVED

Baptism Communion Confirmation

MASS ATTENDANCE

Weekly Occasional Christmas, Easter, Special

ADULT 2

Dr. Mr. Mrs. Ms. Other _____

Full Name: _____

Male Female

Preferred First Name/Nickname: _____

Home Address (if different from Adult 1): _____

City, State, Zip: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Date of Birth: (Month/Day/Year) ____ / ____ / ____

*Marital Status: _____

*Marriage Date: (Month/Day/Year) ____ / ____ / ____

*Current Occupation: _____

*Title: _____

*Company: _____

*Work Phone: _____

*Work Email Address: _____

*Would you be willing to share this work information with our St. Cajetan Ministry to grow the parish network of contacts for unemployed/underemployed? Yes _____ Not right now _____

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Please indicate how you would like your mailings addressed (Mr. and Mrs. John Smith, John and Jane Smith, The Smith Family, John Smith and Jane Jones, etc.):

* Optional

Saint Anne Church - Parish Census Form - Page 2

Total number of individuals in your household: _____

CHILDREN AT HOME (UNDER 18)

FIRST NAME	LAST NAME	SEX M/F	DATE OF BIRTH	DATE AND CHURCH OF BAPTISM	COMMUNION Y/N	CONFIRM Y/N	SCHOOL ATTENDING/ CURRENT GRADE

ADULTS LIVING WITH YOU (18 AND OVER)

FIRST NAME	LAST NAME	SEX M/F	DATE OF BIRTH	MARITAL STATUS	RELIGION	BAPTISM Y/N	COMMUNION Y/N	CONFIRM. Y/N	OCCUPATION

FOR THE FOLLOWING ITEMS, PLEASE GIVE THE NAME OF THE PERSON FOR WHOM THE INFORMATION APPLIES:

Special concerns (handicapped, home-bound, etc.): _____

I currently volunteer as: _____

I would like to volunteer as: _____

In general, I am interested in learning more about: _____

How can the parish serve you better? _____

Please return this form to: Nick Magarelli, Saint Anne Rectory, 15-05 Saint Anne Street, Fair Lawn, NJ 07410 or fax to 201-791-1871.
 You may contact Nick at 201-791-1616, or nmagarelli@stannefairlawnnj.org with any questions or for further information.