

Ste. Anne de Detroit Catholic Church Parish Registration

1000 Ste. Anne Street, Detroit MI 48216 – 313-496-1701

Print and email this form to: yuliana.bautista@steannedetroit.org

Date: _____

Family Last Name:			
Address:	City:	State:	ZIP:
Parish of Previous Registration:	Primary email address:		Phone Number:

Adult #1

Name:		Last Name:	DOB:	Marital Status:
Gender F M	Phone Number:		Sacraments: Baptism First Communion Confirmation Matrimony	First Language / Ethnicity:
	Email:			

Adult #2

Name:		Last Name:	DOB:	Marital Status:
Gender F M	Phone Number:		Sacraments: Baptism First Communion Confirmation Matrimony	First Language / Ethnicity:
	Email:			

1. Why do you want to become a parishioner of Ste. Anne de Detroit? _____

2. Do you need any sacraments? YES NO If yes, which one? _____

3. Would you like to volunteer in Ste. Anne de Detroit? YES NO

Child #1

Name:		Last Name:		DOB:	Marital Status:
Gender: M / F	Religion:		Sacraments: Baptism First Communion Confirmation Matrimony		First Language / Ethnicity:
		Relationship to Adult #1:			
		Relationship to Adult #2:			

Child #2

Name:		Last Name:		DOB:	Marital Status:
Gender: M / F	Religion:		Sacraments: Baptism First Communion Confirmation Matrimony		First Language / Ethnicity:
		Relationship to Adult #1:			
		Relationship to Adult #2:			

Child #3

Name:		Last Name:		DOB:	Marital Status:
Gender: M / F	Religion:		Sacraments: Baptism First Communion Confirmation Matrimony		First Language / Ethnicity:
		Relationship to Adult #1:			
		Relationship to Adult #2:			

Child #4

Name:		Last Name:		DOB:	Marital Status:
Gender: M / F	Religion:		Sacraments: Baptism First Communion Confirmation Matrimony		First Language / Ethnicity:
		Relationship to Adult #1:			
		Relationship to Adult #2:			

Thank you and Welcome to Ste. Anne!