



Date _____

Basilica of Ste. Anne de Detroit Parishioner Registration Form

FAMILY LAST NAME _____

ADDRESS _____

PARISH OF PREVIOUS REGISTRATION _____

ADULT #1

NAME _____

DOB _____

MARITAL STATUS _____

GENDER M _____ F _____

PHONE NUMBER _____

EMAIL _____

SACRAMENTS (PLEASE CIRCLE)

BAPTISM FIRST COMMUNION CONFIRMATION MATRIMONY

FIRST LANGUAGE/ETHNICITY _____

ADULT #2

NAME _____

DOB _____

MARITAL STATUS _____

GENDER M _____ F _____

PHONE NUMBER _____

EMAIL _____

SACRAMENTS (PLEASE CIRCLE)

BAPTISM FIRST COMMUNION CONFIRMATION MATRIMONY

FIRST LANGUAGE/ETHNICITY _____

CHILD #1

NAME _____

DOB _____ MARITAL STATUS _____ GENDER M ___ F ___

SACRAMENTS (PLEASE CIRCLE)

BAPTISM FIRST COMMUNION CONFIRMATION MATRIMONY

FIRST LANGUAGE/ETHNICITY _____

RELATIONSHIP TO ADULT #1 _____

RELATIONSHIP TO ADULT #2 _____

CHILD #2

NAME _____

DOB _____ MARITAL STATUS _____ GENDER M ___ F ___

SACRAMENTS (PLEASE CIRCLE)

BAPTISM FIRST COMMUNION CONFIRMATION MATRIMONY

FIRST LANGUAGE/ETHNICITY _____

RELATIONSHIP TO ADULT #1 _____

RELATIONSHIP TO ADULT #2 _____

CHILD #3

NAME _____

DOB _____ MARITAL STATUS _____ GENDER M ___ F ___

SACRAMENTS (PLEASE CIRCLE)

BAPTISM FIRST COMMUNION CONFIRMATION MATRIMONY

FIRST LANGUAGE/ETHNICITY _____

RELATIONSHIP TO ADULT #1 _____

RELATIONSHIP TO ADULT #2 _____

CHILD #4

NAME _____

DOB _____ MARITAL STATUS _____ GENDER M ___ F ___

SACRAMENTS (PLEASE CIRCLE)

BAPTISM FIRST COMMUNION CONFIRMATION MATRIMONY

FIRST LANGUAGE/ETHNICITY _____

RELATIONSHIP TO ADULT #1 _____

RELATIONSHIP TO ADULT #2 _____