

ST. ANGELA MERICI PARISHIONER REGISTRATION

Welcome to St. Angela Parish! We invite you to fill out this parish registration form.

Please print clearly

Family Name (last name only): _____

Mailing Name (e.g. Mr. & Mrs. John Smith, John & Mary Smith, Ms. Mary Smith)

Mailing Address: _____

Number Street Apt. City Zip

Home Phone: _____ Husband's Cell: _____ Wife's Cell: _____

Email: Husband's _____ Wife's _____

Marital Status: Married Single Widow/Widower Separated Divorced

Contribution Type:

Please choose either envelopes or on-line giving

Envelopes : Monthly _____ Weekly _____

On-Line Giving _____

Would you like to be ?

Listed in Guidebook ___yes ___no

Emailed Bulletin ___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 or Deacon? ___yes ___no

(OVER)

CHILDREN LIVING AT HOME:

Name: Last _____ First _____ Middle _____
Male _____ Female _____ Date of Birth: _____ Place of Birth: _____
Religion: _____
Baptism _____ First Communion _____ Confirmation _____
School Currently Attending: _____ Grade: _____

Name: Last _____ First _____ Middle _____
Male _____ Female _____ Date of Birth: _____ Place of Birth: _____
Religion: _____
Baptism _____ First Communion _____ Confirmation _____
School Currently Attending: _____ Grade: _____

Name: Last _____ First _____ Middle _____
Male _____ Female _____ Date of Birth: _____ Place of Birth: _____
Religion: _____
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Male _____ Female _____ Date of Birth: _____ Place of Birth: _____
Religion: _____
Baptism _____ First Communion _____ Confirmation _____
School Currently Attending: _____ Grade: _____

OFFICE USE ONLY
Date Received _____
Envelope # _____
Entered by _____

St. Angela Merici Parish
901 Beverly Garden Drive
Metairie, Louisiana 70002
Telephone: (504) 835-0324
Fax: (504) 834-9709
Website: www.stangela.org

