



## Family Registration Information

The information you provide on this form is of great value to St. Ann's in conducting the Parish ministry for you and your family. After gathering your records, completing this form takes about 20 minutes – make sure to complete both pages. This information should be returned as soon as possible by mail: St. Ann Catholic Church, 3635 Park Road Charlotte, NC 28209, by email: [stanncharlotte@charlottediocese.org](mailto:stanncharlotte@charlottediocese.org), by fax: 704-527-8671. Please contact the church office with any questions: 704-523-4641.

Please answer all applicable questions:

Previous Parish: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: \_\_\_\_\_

Mail Addresses to (circle one or two):    Dr.            Dr. &            Mr.            Mr. &            Mrs.            Ms.            Miss.

Your Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Spouse's Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Address (Street) \_\_\_\_\_ (check if unlisted phone)

(City, State Zipcode) \_\_\_\_\_ Home Phone \_\_\_\_\_

Your Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Work Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Spouse Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Work Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Would you be interested in offering your time and talent to one of St. Ann's Parish Commissions? (Check applicable areas of interest)

	Liturgy & Worship	Education & Formation	Community	Parish Life	Evangelization & Communication	Building & Facilities	Ecumenism
Self:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spouse:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Others: (Name)							
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Interests? \_\_\_\_\_

\_\_\_\_\_

