



Family Name: _____

First Name: _____ Cell Number: _____ Email: _____

Spouse Name: _____ Spouse Cell: _____ Spouse Email: _____

Mailing Address: _____

Street Address

City

State

Zip Code

Home Phone Number: _____

First Name	Title (Mr. Mrs. Ms. Dr., etc)	Nickname	Gender (M/F)	Date of Birth (xx/xx/xxxx)	Marital Status	Religion	Employer or School	Occupation or Grade

Do you wish to receive a monthly packet of Church Envelopes? ☐ Yes ☐ No

If you wish to receive personalized parish envelopes, please check above box. After we receive the completed form we will order your envelopes and you should receive them within 6-8 weeks from the date they are ordered. Until the envelopes arrive, please write your name on the outside of an envelope and place your donation inside so we can properly record your donations.

Sacrament Information:

Please indicate which sacraments you have received with the approximate date received: (Month, Year) and the name of the Church who performed the sacraments.

First Name	Baptism	First Reconciliation	First Communion	Confirmation	Marriage

Emergency Contact: _____
Name Contact Number

Were you previously registered at another parish? ☐ Yes ☐ No If yes, please list the parish and city, state: _____

Do you wish to receive information about Saint Ann School? ☐ Yes ☐ No

Saint Ann Catholic Church shares photos of events, celebrations, service projects, and fellowship in parish newsletters as well as on the website and with the Tennessee Register. I give my consent for individual, identifying photographs of myself, my family and my child(ren) to be used on the Saint Ann Catholic Church website, in the media, in newsletters and/or advertisements promoting the church. ☐ Yes ☐ No

Becoming an active member of Saint Ann Catholic Community requires registration, regular attendance at Mass, and participation in one or more ministries. Please let us know if you are interested in joining one of the Church ministries at this time.
