



**OUR LADY OF THE MOUNTAINS
2905 White Mountain Highway
North Conway NH 03860**

REGISTRATION FORM - 2017

FAMILY NAME: _____ Full Time Parishioner: _____ Part Time: _____
 MAILING ADDRESS: _____ STREET ADDRESS: _____
 TOWN/STATE: _____
 ZIP: _____
 TELEPHONE: _____ email: _____
Please send monthly offertory envelopes: Yes No

HEAD OF HOUSEHOLD: _____ M F
MARITAL STATUS: _____ **DATE OF BIRTH:** _____
OCCUPATION: _____ **RELIGION:** _____
PLACE OF WORK: _____ **PHONE:** _____
SACRAMENTS: Baptism Holy Communion Penance Confirmation Marriage

SPOUSE: _____ M F **DATE OF BIRTH:** _____
MARITAL STATUS: _____ **RELIGION:** _____
OCCUPATION: _____ **Maiden Name:** _____
PLACE OF WORK: _____ **PHONE:** _____
SACRAMENTS: Baptism Holy Communion Penance Confirmation Marriage

LIST ALL OTHER MEMBERS **CURRENTLY RESIDING** IN YOUR HOUSEHOLD:

NAME	M	F	Date of Birth	Baptism	1 st Communion	Penance	Confirmation

Please print form and mail to: OLM Census, 2905 White Mountain Highway, North Conway NH 03860 Please SAVE and email form to: ourladynh@myfairpoint.net

If you have a seasonal residence, please fill out the back of this form. →→→→→→→→→→→→→→→

Name:

Seasonal Address:

City State Zip

Can you receive mail at this second address? YES NO

Months you are at this residence:

From through

Please continue to send monthly offertory envelopes while away:

yes no