



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

Today's Date _____

REGISTRATION FORM

FAMILY NAME: _____

Full Time Parishioner: _____ Part Time: _____

MAILING ADDRESS: _____

STREET
ADDRESS: _____

TOWN: _____

ZIP: _____ - _____

TELEPHONE: _____

email: _____

Please send monthly offertory envelopes: _____ yes _____ no

HEAD OF HOUSEHOLD: _____

DATE OF BIRTH: _____

MARITAL STATUS: _____

RELIGION: _____

OCCUPATION: _____

PLACE OF WORK: _____

PHONE: _____

SACRAMENTS: _____ Baptism _____ Holy Communion _____ Penance _____ Confirmation _____ Marriage

SPOUSE: _____

DATE OF BIRTH: _____

MARITAL STATUS: _____

RELIGION: _____

OCCUPATION: _____

PLACE OF WORK: _____

PHONE: _____

SACRAMENTS: _____ Baptism _____ Holy Communion _____ Penance _____ Confirmation _____ Marriage

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

NAME	Male (M) Female (F)	Date of Birth	Baptism yes/no	1 st Communion yes/no	Penance yes/no	Confirmation yes/no

Please mail form to: OLM Census, 2905 White Mountain Highway, North Conway NH 03860

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
