

Most Holy Trinity Church Parish Registration

1050 Porter Street • Detroit, Michigan 48226 • 313-965-4450 • *Print and fax this form to 313-965-4453*

Registration Form | Family Name (Last Name):

Mailing Address (P.O. Box or Street)		Street Address (if different from mailing address)		City	State	ZIP
Home Phone	Male Cell/ Work Phone	Female Cell/ Work Phone	Family's Primary e-mail address			
Subdivision		Parish of Previous Registration (Church Name and Location)				

Members of the Household

First & Middle name. Last name only if different from above. (<u>Underline</u> if different last name).	Date of Birth	M/F	Marital Status	Occupation and Employer or School and grade	First Language and Ethnicity	Religion (if not Catholic)

Additional members on reverse side

Check Sacraments Received (Please indicate date each Sacrament was received, if known)

Name	Baptism	Reconciliation	Communion	Confirmation	Catholic Marriage

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Do you have any special needs of situations that you wish to call to our attention? *Please indicate below or, if you prefer, write "please call" and we will contact you personally.*

How did you find Ste Anne's, and what prompted you to join our Faith Community?

Please inform your former parish that you are changing to another parish.

Additional Household Members

First & Middle name. Last name only if different from above. (<u>Underline</u> if different last name).	Date of Birth	M/F	Marital Status	Occupation and Employer or School and grade	First Language and Ethnicity	Religion (if not Catholic)

Check Sacraments Received (Please indicate date each Sacrament was received, if known)

Name	Baptism	Reconciliation	Communion	Confirmation	Catholic Marriage

Thank you, and welcome to Most Holy Trinity Church!