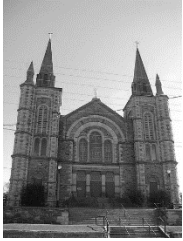


**Parish Registration**



**St. Ann's Parish/  
Parroisse Sainte-Anne**  
28 Robert St., W  
Penetanguishene, ON L9M 1N2  
705-549-2560

[www.stannspe.archtoronto.org](http://www.stannspe.archtoronto.org)

*Please print clearly*

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Spouses' Name: \_\_\_\_\_

Children:

\_\_\_\_\_ D.O.B: \_\_\_\_\_

\_\_\_\_\_ D.O.B: \_\_\_\_\_

\_\_\_\_\_ D.O.B: \_\_\_\_\_

\_\_\_\_\_ D.O.B: \_\_\_\_\_

\_\_\_\_\_ D.O.B: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

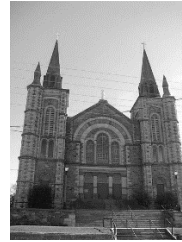
\_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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\_\_\_\_\_ D.O.B: \_\_\_\_\_

\_\_\_\_\_ D.O.B: \_\_\_\_\_

\_\_\_\_\_ D.O.B: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

I would like to volunteer for:

I would like to volunteer for:

(check off all that apply)

(check off all that apply)

- Extraordinary Minister of Communion
- Minister of Hospitality (Usher)
- Minister of the Word (Lector)
- Minister of the Altar (Altar Server)
- Youth Ministry Team Member
- Choir Member
- Cantor/Organist
- Youth Band
- St. Vincent de Paul Society
- Other: \_\_\_\_\_

- Extraordinary Minister of Communion
- Minister of Hospitality (Usher)
- Minister of the Word (Lector)
- Minister of the Altar (Altar Server)
- Youth Ministry Team Member
- Choir Member
- Cantor/Organist
- Youth Band
- St. Vincent de Paul Society
- Other: \_\_\_\_\_

I would like to participate in

I would like to participate in

(check of all that apply)

(check of all that apply)

- Envelope Use     Envelope Number
- Pre-Authorized Giving

- Envelope Use     Envelope Number
- Pre-Authorized Giving

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Please deliver to the Parish Office by mail, collection basket, or offering box in the church.

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Thank you.

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