

# Welcome to St. Ann Parish!

## List of Additional Children for Parish Registration

**FORM 2**

**ST. ANN PARISH REGISTRATION FORM**  
**24500 S. NAVAJO DR.—CHANNAHON, IL 60410**



Office use: Date: \_\_\_\_\_

Envelope # \_\_\_\_\_

Family Last Name: _____		Head of Household Cell Phone: _____	
Address: _____		Spouse Cell Phone: _____	
City/St/Zip _____		Family email address: _____	
Child Name: _____		Baptism:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Birthdate: _____		First Reconciliation (Confession):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		First Holy Communion:	<input type="checkbox"/> Yes <input type="checkbox"/> No
20__-__ School grade K-12: _____		Confirmation:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Away at college: <input type="checkbox"/> Yes <input type="checkbox"/> No		Attends Catholic School or RE:	<input type="checkbox"/> Cath. <input type="checkbox"/> RE <input type="checkbox"/> No
Disabilities or special needs: _____		_____	
Child Name: _____		Baptism:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Birthdate: _____		First Reconciliation (Confession):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		First Holy Communion:	<input type="checkbox"/> Yes <input type="checkbox"/> No
20__-__ School grade K-12: _____		Confirmation:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Away at college: <input type="checkbox"/> Yes <input type="checkbox"/> No		Attends Catholic School or RE:	<input type="checkbox"/> Cath. <input type="checkbox"/> RE <input type="checkbox"/> No
:Disabilities or special needs _____		_____	
Child Name: _____		Baptism:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Birthdate: _____		First Reconciliation (Confession):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		First Holy Communion:	<input type="checkbox"/> Yes <input type="checkbox"/> No
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20__-__ School grade K-12: _____		Confirmation:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Away at college: <input type="checkbox"/> Yes <input type="checkbox"/> No		Attends Catholic School or RE:	<input type="checkbox"/> Cath. <input type="checkbox"/> RE <input type="checkbox"/> No
Disabilities or special needs: _____		_____	