

ST. AGNES CHURCH - 523 Front Street, Greenport, NY 11944

Family Name: _____ Date: _____

Address: _____ City: _____ Zip: _____ **FOR OFFICE USE ONLY:**

Home Telephone: _____ Years in this Parish: _____ Family #: _____

E-Mail Address: _____ Envelope #: _____ BAA #: _____

List Only Those Living With You	M/F	Date of Birth Mo.-Yr	Place of Birth	Religion	SACRAMENTS			Mass Attendance	Marital Status	Parish Organization	School or Occupation Retired
					Baptism	1st Comm	Confirm				
Head of the Household											
Spouse											
Children											
Others Living With You (How Related)											

(See Other Side)

- Year-round
- Summer

Will you use weekly envelopes? Yes No

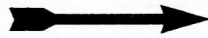
Homebound: _____

Please list special talents here:

Special Needs: _____

CORRECTIONS FOR PARISH MAILING LIST

IS THE MAILING ADDRESS OF YOUR HOUSEHOLD CORRECT AS IT APPEARS ON THE LABEL AT RIGHT? (IF NOT, PLEASE CORRECT IT, THANKS!) IF MAILINGS ARE TO BE SENT TO HUSBAND AND WIFE, INDICATE "MR & MRS" AND THE HUSBAND'S FIRST NAME AND MIDDLE INITIAL.



HOUSEHOLD MAILING ADDRESS

Check box for mailing address of Household:
 Mr. & Mrs. Mr. Mrs. Miss Ms. _____

FIRST NAME M.I. LAST NAME

P.O. BOX STREET APT.

CITY STATE ZIP CODE