St. Luke Catholic Church Registration Form Last Name: Spouse Name: Title (check one): ☐ Mr. & Mrs. ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss. ☐ Dr. & Mrs. ☐ Mr. & Dr. Marital Status (check one): ☐ Married by priest ☐ Married by other ☐ Single ☐ Divorced ☐ Separated ☐ Widowed Street or P.O. Box:_____City:_____ State:_____Zip: _____ If PO Box give street address:______ Number of Children at home: _____ Home Phone:_____ () (unlisted to not publish) Email address: _____ Last Parish registered in: **Member Information** (Children 18 and over should be registered under their own name) Spouse Head of Household Child Name: Name:_____ (Under 18) Maiden Name:_____ Maiden Name:_____ Religion: Religion: Business Phone: Religion: Business Phone: School:_____ Cell Phone: Cell Phone: Birth Date: Email:_____ Email: Place of Birth: Birth Date:____ Birth Date: Place of Birth:____ Place of Birth: Sex: _____ Sex: _____ Occupation____ Occupation____ Talents _____ Talents For each sacrament below enter the **Date and Church** of sacrament if known (approximate okay), enter **yes** if sacrament was received but the date is unknown, enter **here** if your Baptism Date:_____ Baptism Date:_____ Baptism Date:_____ Church:____ Church: _____ Church:_____ First Communion Date:_____ First Communion Date: First Communion Date:_____ Church:____ Church:____ Church:_____ Confirmation Date:_____ Confirmation Date: Confirmation Date: Church: ____ Church:____

Marriage Date:____

Church:

07/23/22

Marriage Date:_____

Church:

Child (Under 18)	<u>Child</u> (Under	· 18)	<u>Child</u> (Under 18)		Parent or Other				
Name:	Name:	· · · · · · · · · · · · · · · · · · ·	Name:		Name:				
Religion:	Religion:		Religion:		Maiden name				
School:	School:		School:		Religion:				
Birth date:	Birth Date:_		Birth Date:		Phone:				
Place of Birth:	of Birth: Place of Birth:		Place of Birth:		Birth Date:				
Sex:					Place of Birth:				
For each sacrament below enter the Date a	nd Church of sacr	rament if known (approximate	okay), enter yes if sacrament was rece	ived but	Sex:Baptism Date:				
the date is unknown, enter here if your sacraments where received at St.					Church:				
Baptism Date:		te:	Baptism Date:		First Communion Date:				
Church:	Church:		Church:		Church:				
First Communion Date:			First Communion Date:		Confirmation Date:				
Church:					Church:				
Confirmation Date:					Marriage Date:				
Church:	Church:		Church:		Church:				
Inter	ests (Check	any ministry you or you	ur family members would like	to volur					
MINISTRIES			Education Programs		sh Outreach				
Liturgical Ministries			nation (Grades K-8)	□ Be	reavement				
 □ Adoration of the Blessed Sacrament □ Altar Servers □ Extraordinary Ministers of Holy Communion (EMHC) □ Homebound Visitation □ Hospital Visitation 		 ☐ Children's Liturgy of the Word (CLOW) ☐ RCIA Adapted for Children and Teens (RCIA-C) ☐ Sponsor RCIA-Children and Teens ☐ Sacramental Preparation ☐ First Reconciliation/First Eucharist ☐ Confirmation ☐ Vacation Bible School (VBS) Additional Volunteer Positions/Needs 		□ Community Assistance□ Operation Blessing□ Community Kitchen□ Blanket Ministry					
						☐ Greeters			
						☐ Lectors ☐ Music Ministry		□Ro	sary Makers
						☐ Cantors ☐ Musicians ☐ Choir		□ Sponsor PREP	
☐ Ushers						Youth and Young Ad		016/01	·
Educational Ministries				☐ Catholic Youth Mini (Grades 9-12)	stry (CYM) Senior High	Gift Sh ☐ Gift			
☐ Homeschool		Coouto		TALEN	ITS/SKILLS				
Spiritual Ministries		Scouts □ Boy			inistrative/Clerical				
☐ Traveling Chalice		☐ Girls			o/Video Equipment				
Religious Education		Social Ministries			mation Technology (IT) Support dscaping				
Adult Religious Education Program	าร	☐ Council of Catholic	Women (CCW)		guage skills				
☐ Adult Faith Formation	It- (DOIA)	☐ Festival			anslation				
□ Rite of Christian Initiation for Adults (RCIA)□ Sponsor RCIA-Adults		☐ Knights of Columbus☐ Ladies Auxiliary of the Knights of Columbus☐ Nursery			gn Language for the Hearing Impaired				
				□ Mair	ntenance				