Parish Regist	tration Form			
· ·	d complete all requested info	· · · · · · · · · · · · · · · · · · ·		
Family Name		Head of House	(First)	(Middl
Home Address			(11150)	(Mildul
Telephone Num	(Street Number) per	(City)		(Zip Code)
Head of House _		Religion		
	(First)	(Middle)		
Date of Birth		Occupation		
Please check off	the sacraments received i	n the Catholic Church:		
Baptism	First Reconciliation	First Communion	Confirmation	Marriage
*If married, plea	se indicate the name of the	Church and date:		
Church married	at			
Traine of Spoure	(First) (Middle)		100.8101.	
Date of Birth	()	Occupation		
	the sacraments received i			
	First Reconciliation		Confirmation	Marriage
Name of Child				
_	(First) (Middle)			
Date of Birth		Grade School At	tending	
	the sacraments received i			
Baptism	First Reconciliation	First Communion	Confirmation	Marriage
Name of Child_			Religion_	
	(First) (Middle)			
Date of Birth		GradeSchool At	tending	
Please check off	the sacraments received i	n the Catholic Church:		
Baptism	First Reconciliation	First Communion	Confirmation	Marriage
Name of Child		Religion		
		(Last)		
Date of Birth		GradeSchool At	tending	
Please check off	the sacraments received i	n the Catholic Church:		
Baptism	First Reconciliation	First Communion	Confirmation	Marriage

Are you interested in information about Religious Education? ____Yes ___No If yes how would you like to receive it?_____

Thank you for joining our parish family at St. Luke Parish! We are excited to have you worshipping with us!