

ST. LUKE THE EVANGELIST CATHOLIC CHURCH PARISH REGISTRATION FORM

PDS# _____	CN# _____
Entered into Envelope System _____ Initial: _____	

Last Name: _____ Sr. Jr. II III
 First Name: _____ Title: Mr. Mrs. Ms. Dr. **Email:** _____
 Spouse: _____ Title: Mr. Mrs. **Ethnicity:** _____
 Ms. Dr.

Mailing Address: _____ Apt/Unit # _____ City _____ State FL Zip _____
 Primary Phone #: () _____ Unlisted:(Y) (N) Secondary Phone #: () _____ Unlisted:(Y) (N)

Family Status: Married Single Divorced Separated Widowed Marriage blessed by Catholic Church: [Y] [N] Date of Marriage _____

-Circle one - Permanent Resident Seasonal Resident Would you like to receive church envelopes? [Y] [N]

If you live alone, please list emergency contact: Name: _____ Relationship: _____ Phone: () _____

FOR EACH FAMILY MEMBER LIVING IN YOUR HOUSEHOLD (INCLUDING THOSE LISTED ABOVE) FILL IN THE INFORMATION BELOW.						
	Head	Spouse	Child	Child	Child	Other (Relationship)
First Name						
Last Name (if different)						
Maiden Name						
Languages Spoken						
Religion						
Handicap						
Occupation						
Place of Employment						
Bus. Phone & Ext.						
School Child attends						
Sex	[M] [F]	[M] [F]	[M] [F]	[M] [F]	[M] [F]	[M] [F]
Birth Date	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___
Baptism	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]
1 st Communion	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]
Confirmation	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]

See reverse side for various Parish Ministries and Organizations. Please check appropriate box if there is an interest.

Member Information [Please list only those Living in Household]

	Child	Child	Child	Other
First Name				
Last Name (if different)				
Religion				
Handicap				
Languages Spoken				
School Name				
Sex	[M] [F]	[M] [F]	[M] [F]	[M] [F]
Birth Date	___/___/___	___/___/___	___/___/___	___/___/___
Baptism	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]
1 st Holy Communion	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]
Confirmation	[Y] [N]	[Y] [N]	[Y] [N]	[Y] [N]

Children: Attend or plan to attend Guardian Angels Catholic School [Y] [N]

Attend or plan to attend Faith Formation (CCD)? [Y] [N]

****Family must register with the Parish prior to child attending Faith Formation Classes****

Parish Organizations and Ministries
(Circle Ministry if interested in more information)

Altar Servers
Eucharistic Ministers
Greeters
Lectors/Readers
Sacristan
Ushers
Youth Altar Servers
Youth Choir
Youth Ministry

Baptism Prep Classes
Bereavement Ministry
Bible Study
Christ Renews His Parish
Early Childhood Center
Evangelization Committee
Fellowship Committee
Faith Sharing Group
Finance Committee

Homebound Driving Ministry
Knights of Columbus
K of C Ladies Auxiliary
St. Luke Lay Apostles
Music Ministry
Outreach
Pastoral Council
Rite of Christian Initiation of Adults
Respect Life

Respite Care
Resurrection Ministry
Rosary Makers
Sacristan
School of Faith
Sick & Homebound Ministry
Single Adult Ministry
Teams of Our Lady
That Man is You!