ST. LUCY PARISH

REGISTRATION CARD

Ph. 262-554-1801, Fax-262-554-2009 3101 Drexel Ave, Racine, WI 53403 www.stlucychurch.org

Family Last Name: _____ **Date:**_____

Address: _____

City/State/Zip: _____

Home Phone : _____ **Cell Phone :**_____ **Name:**_____

Cell Phone :_____**Name:**_____

Title: (Circle one) **Mr. Mrs. Mr. & Mrs. Ms. Miss Dr. Dr. & Mrs. Mr. & Dr. Drs.**

PLEASE CIRCLE THOSE THAT APPLY: **Single Married Separated Divorced**

Single Parent Widowed Remarried Engaged

E-mail address:_____

Adult 1 (First Name & Initial): _____ **Date of Birth:**_____

Last Name (if different from Family Name: _____

Maiden Name (if applicable):_____ **Religion:** _____ **Occupation:** _____

Employed at: _____ **Work Phone:** _____

Spouse/Adult 2 (First Name & Initial): _____ **Date of Birth:**_____

Last Name (if different from Family Name): _____

Maiden Name (if applicable):_____ **Religion:** _____ **Occupation:** _____

Employed at: _____ **Work Phone:** _____

Children living at home:

Last Name	First Name	Date of Birth	M/F	Catholic? Y/N	School	Grade

Parish that you were most recently a member of? _____

*Be sure to let your previous parish know that you have joined another parish so that they can update their records!

Registration cards may be mailed in, dropped in collection basket, slipped under Parish Office Door on the weekend or dropped off at the Parish Office during the week, 8am to 4pm!

For Office Use Only:

Date received in office:_____

Membership #_____

__Computer __Envelopes
__New Parish Arch __Rolodex
__New Parish Bulletin __Keyword
__Welcome Packet

04/05/13