Saint Luke's Catholic Church

Mailing: 417 East 3rd Street Ogallala, NE 69153 ✞ Phone: 308-284-3196 ✞ Fax: 308-284-3599

Male Head of Household Information	Cell Phone:		**Female Head of Household Information**	Cell Phone:	
Last Name:	First Name:	MI:	Last Name:	First Name:	MI:
Title: (e.g. Mr., Dr.)	Suffix:		Title: (e.g. Mrs. Ms. Dr.)	Maiden Name:	
Birthdate:	Nickname:		Birthdate:	Nickname:	
Occupation:			Occupation:		
Religion:	Interested in becoming Catholic?		Religion:	Interested in becoming Catholic?	
Sacraments: : Baptism ☐ 1st Communion ☐ Confirmation ☐			**Sacraments**: Baptism ☐ 1st Communion ☐ Confirmation ☐		

Marital Status (check): Married ☐ Date of Marriage: Single ☐ Separated ☐ Divorced ☐ Annulled ☐ Widowed ☐

Married in Catholic Church ☐ Married Civilly ☐ Other ☐ _____ Interested in talking to Father about your marriage? ☐

FAMILY INFORMATION

Street Address: City/State/Zip:

Home Phone(s):

Family Email Address(es):

FAMILY MEMBER INFORMATION

Children at Home First Name	Last Name (If different)	Sex M/F	Birthdate	Relationship (son,daughter,niece,etc.)	Religion	Baptized	First Communion	Confirmation	Name of School Attending / Grade
1)						Y☐ N☐	Y☐ N☐	Y☐ N☐	
2)						Y☐ N☐	Y☐ N☐	Y☐ N☐	
3)						Y☐ N☐	Y☐ N☐	Y☐ N☐	
4)						Y☐ N☐	Y☐ N☐	Y☐ N☐	
5)						Y☐ N☐	Y☐ N☐	Y☐ N☐	
6)						Y☐ N☐	Y☐ N☐	Y☐ N☐	
7)						Y☐ N☐	Y☐ N☐	Y☐ N☐	
8)						Y☐ N☐	Y☐ N☐	Y☐ N☐	

Others at Home (e.g.adult children, Grandparents, etc.)

First Name	Last Name	Sex M/F	Birthdate	Relationship	School / College / Occupation

Does anyone in your household have **special needs?** No ☐ Yes ☐ Large print missal ☐ Home/Hospital Bound ☐

Please describe how we can help:

.

Further details we'd like to know about you!

Do you have any additional children?

Children First Name	Last Name (If different)	Sex M/F	Birthdate	Relationship (son,daughter,niece,etc.)	Religion	Baptized	First Communion	Confirmation	Name of School Attending / Grade
9)						Y☐ N☐	Y☐ N☐	Y☐ N☐	
10)						Y☐ N☐	Y☐ N☐	Y☐ N☐	
11)						Y☐ N☐	Y☐ N☐	Y☐ N☐	

How would your family like to participate?

Liturgical and Parish Ministries your Family might be interested in? ☐**Altar Serving** ☐**Lector** ☐**Eucharistic Minister** ☐**Ministry to the Home/Hospital Bound** ☐**Sacristan**

☐**Music Ministry** ☐**Livestreaming/Recording/Photography** ☐**Website** ☐**Other** _____

Other Areas about which you'd like someone to contact you: ☐**Annulment info** ☐**Becoming Catholic** ☐**Adult Confirmation**

Details about anything you checked that you'd like to share here before someone contacts you:

_____

_____

_____

What else would you like to share about your family? In what ways have you served God in previous parishes?

_____

_____

_____

We are delighted you've chosen to join our family!