DATE:_____/_____/_____ ENV.#_____

St. Luke's Church, Ho-Ho-Kus, NJ

Please return this form to Parish Office—340 North Franklin Turnpike – (201)444-0272

FAMILY NAME: _____

Address_____City_____State_____Zip_____

Home Telephone (____)_____ Husband Cell Phone (____)_____ Wife Cell Phone (____)_____ Family e-mail _____

Marital Status: ___ Married ___ Single ___Widowed ___ Separated ___ Divorced ___ Annulled
Marriage Date: _____/_____/_____ Married by: ___ Priest ___ Minister ___Civil

You may support the parish in one of the following ways:
____ I will use weekly envelopes
____ I will sign up for Parish Pay on-line (www.parishpay.com)

HEADS OF HOUSEHOLD

Last Name	First Name	DOB M/D/Y	Religion Catholic Protestant Jewish, Other	Gender M/F	Baptized Yes/No	1st Comm. Yes/No	Confirm. Yes/No	Attend Mass Weekly Occas. Never	Ethnic Origin	Languages Spoken	Education	Occupation

Wife's Maiden Name:_____

CHILDREN LIVING AT HOME (Please submit copy of each child's Baptism certificate)

Last Name	First Name	DOB M/D/Y	Religion Catholic Protestant Jewish, Other	Gender M/F	Baptized Yes/No	1st Comm. Yes/No	Confirm. Yes/No	Attend Mass Weekly Occas. Never	Ethnic Origin	Languages Spoken	Education	School Grade

ADULTS LIVING WITH YOU

Last Name	First Name	DOB M/D/Y	Religion Catholic Protestant Jewish, Other	Gender M/F	Baptized Yes/No	1st Comm. Yes/No	Confirm. Yes/No	Attend Mass Weekly Occas. Never	Ethnic Origin	Languages Spoken	Education	Occupation