

St. Lucy Parish

Faith Formation Registration

254 Merrimack St., Methuen MA 01844

(978)686-3311

Family Last Name: _____ Date: _____
Father's Name: _____ Home Phone: _____
Mother's Name: _____ Cell: _____
Email: _____ Emergency Contact: _____
Home Address: _____

Do you have other children registered in St. Lucys Faith Formation Program?: _____

Custodial Parent, if different from above: _____

Child	_____	Date of Sacrament:	_____
Date of Birth	_____	Baptism	_____
Sex	_____	Eucharist	_____
Grade	_____	Penance	_____
Session	_____	Confirmation	_____

SPECIAL NEEDS: Medical, learning or physical (please specify): _____

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Date of Birth	_____	Baptism	_____
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SPECIAL NEEDS: Medical, learning or physical (please specify): _____

***NOTE: PLEASE INCLUDE A COPY OF BAPTISM CERTIFICATE**