

Associate Registration Form
St. Francis of Assisi Church, 1145 South Street, Lincoln, NE 68502 (402) 477-5145

Please email completed form to: admin@stfrancislincoln.org

Head of Household: May your name, address, home phone number, and email be printed in a church directory? yes no

_____, _____
Last Name First Name

Name of spouse (including maiden name)

Street Address

Email address (optional, but helpful)

_____/_____/_____
City State Zip Code

_____/_____
Home phone* Cell phone*
(*Please provide one or both.)

Marital Status:

single (never married) married widowed

separated divorced decree of nullity granted

_____/_____/_____
Date of Marriage Place of Marriage (City/State)

Other phone (optional)

Note: St. Francis Church is not a parish. To be an Associate of this church, one must first be registered at a parish.

Are you registered in a parish of this Diocese? yes no

Was your marriage witnessed by a Priest or Deacon yes no

Name of your Parish (please include the town)

Occupation

Employer (optional)

Please list any medical concerns you wish for the Rector to know: _____

Note: Some kinds of legal documents concerning one's intentions for medical care may be contrary to Catholic moral teaching.

Have you ever signed any document such as a grant of Medical Power of Attorney, Living Will, etc.? yes no

What kind of such document have you signed? _____

Do you have a plan for Funeral Arrangements? yes no

Does your funeral plan include a Traditional Requiem Mass? yes no If "yes", where? _____

*Information on this form is confidential, intended only for the use of St. Francis of Assisi Church and the Diocese of Lincoln.
The name and address of the head of the household will be provided to the Priestly Fraternity of St. Peter.*

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Please list all members of household -- self, spouse, children still living at home, and relatives living with you.

Name	Date of Birth	Date of Baptism	Parish where Baptized (Include City/State)	First Holy Communion (Yes/No)	Confirmation (Yes/No)

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