

CHILD (first/middle/last) _____

RELIGION _____ SEX _____ DOB _____

HANDICAP _____

GRADE _____ PUBLIC -or- PAROCHIAL

SCHOOL NAME _____ LOCATION: _____

MINISTRIES AT MASS AND OTHER TALENTS: _____

CHILD (first/middle/last) _____

RELIGION _____ SEX _____ DOB _____

HANDICAP _____

GRADE _____ PUBLIC -or- PAROCHIAL

SCHOOL NAME _____ LOCATION: _____

MINISTRIES AT MASS AND OTHER TALENTS: _____

CHILD (first/middle/last) _____

RELIGION _____ SEX _____ DOB _____

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CHILD (first/middle/last) _____

RELIGION _____ SEX _____ DOB _____

HANDICAP _____

GRADE _____ PUBLIC -or- PAROCHIAL

SCHOOL NAME _____ LOCATION: _____

MINISTRIES AT MASS AND OTHER TALENTS: _____

SACRAMENTS

YES/NO and DATE RECEIVED (if known)

BAPTISM _____

RECONCILIATION _____

FIRST COMMUNION _____

CONFIRMATION _____

SEX _____ DOB _____

SACRAMENTS

YES/NO and DATE RECEIVED (if known)

BAPTISM _____

RECONCILIATION _____

FIRST COMMUNION _____

CONFIRMATION _____

SEX _____ DOB _____

SACRAMENTS

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BAPTISM _____

RECONCILIATION _____

FIRST COMMUNION _____

CONFIRMATION _____

SEX _____ DOB _____

SACRAMENTS

YES/NO and DATE RECEIVED (if known)

BAPTISM _____

RECONCILIATION _____

FIRST COMMUNION _____

CONFIRMATION _____

SACRED HEART PARISH CENSUS INFORMATION

TODAY'S DATE: _____

LAST NAME: _____ ADDRESS: _____

CITY/STATE/ZIP: _____ PHONE #: _____

FORMER PARISH & LOCATION: _____

MARITAL STATUS: ___ SINGLE ___ CHURCH RECOGNIZED MARRIAGE ___ NOT CHURCH RECOGNIZED MARRIAGE ___ DIVORCED ___ WIDOWED

E-MAIL ADDRESS _____ I prefer to receive information via ___ e-mail -or- ___ regular mail.

HEAD OF HOUSEHOLD^(first/middle/last) _____ SEX _____ DOB _____

MAIDEN NAME (if applicable) _____

RELIGION _____

HANDICAP _____

EMPLOYER _____

OCCUPATION _____ BUSINESS PHONE _____

MINISTRIES AT MASS AND OTHER TALENTS: _____

SPOUSE^(first/middle/last) _____ SEX _____ DOB _____

MAIDEN NAME (if applicable) _____

RELIGION _____

HANDICAP _____

EMPLOYER _____

OCCUPATION _____ BUSINESS PHONE _____

MINISTRIES AT MASS AND OTHER TALENTS: _____

SACRAMENTS

YES/NO and DATE RECEIVED (if known)

BAPTISM _____

RECONCILIATION _____

FIRST COMMUNION _____

CONFIRMATION _____

MARRIAGE _____

SACRAMENTS

YES/NO and DATE RECEIVED (if known)

BAPTISM _____

RECONCILIATION _____

FIRST COMMUNION _____

CONFIRMATION _____

MARRIAGE _____

By signing this, I agree to allow Sacred Heart Parish to release my name, address and/or telephone number to parish committees for possible stewardship involvement.

Signature: _____ Date: _____

(See reverse side for additional family members.)