

Parish Census Registration

Family Last Name _____

(Please Print Legibly)

_____ We are no longer parishioners at St. Andrew the Apostle Parish. Please remove our family from the census. To ensure that the correct family is removed from our records, please complete the "Home Street Address" and "Home Phone" that would be in our records in the section below. Thank you.

Office Use Only ID # _____	Original Registration Date _____	HOME STREET ADDRESS _____	CITY _____	ZIP CODE _____
HOME PHONE () _____ <input type="checkbox"/> Unlisted Cell Phone () _____ This phone number will not be shared with others, unless you give permission. <input type="checkbox"/> Yes		FAMILY EMAIL _____ Emergency Contact Person _____ Phone () _____	HOW WOULD YOU LIKE TO BE ADDRESSED? <input type="checkbox"/> Mr. & Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Other	
Are you receiving Contribution Envelopes from the Parish? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, do you use them? <input type="checkbox"/> Yes <input type="checkbox"/> No	If you are not receiving envelopes, do you want them? <input type="checkbox"/> Yes <input type="checkbox"/> No	You will be on the Parish Mailing List unless you say no <input type="checkbox"/> No
<input type="checkbox"/> New Parishioner <input type="checkbox"/> Year Around Parishioner <input type="checkbox"/> Seasonal Parishioner <input type="checkbox"/> Parish Envelope Number (if you have one) _____				
MAILING ADDRESS (If different from home address) _____		MARITAL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed Place of Marriage _____ Year _____		

MALE HEAD OF HOUSEHOLD (Head of Household for Census <input type="checkbox"/>) Name _____ <i>First</i> <i>Middle</i> <i>Last</i> Preferred Name to be called _____ Title <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Other _____ Date of Birth _____ Religion _____ Occupation/skills/Talents _____ Yes only (check) <input type="checkbox"/> Baptism <input type="checkbox"/> First Communion <input type="checkbox"/> Confirmation	FEMALE HEAD OF HOUSEHOLD (Head of Household for Census <input type="checkbox"/>) Name _____ <i>First</i> <i>Middle</i> <i>Last</i> (<i>Maiden</i>) Preferred Name to be called _____ Title <input type="checkbox"/> Miss. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Other _____ Date of Birth _____ Religion _____ Occupation/skills/Talents _____ Yes only (check) <input type="checkbox"/> Baptism <input type="checkbox"/> First Communion <input type="checkbox"/> Confirmation
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Please Note: Please complete the "Child" and/or "Other" section on the reverse side of this form. Children away at college should be listed. Children 24 years or older and out of school are encouraged to register on their own at the Parish Office as a new individual parish family. Also, please list any family members other than children living at your residence. Please use an additional sheet of paper if needed.

CHILD

Name _____
First *Middle* (*Last*)

Last Name (if different from Family Name) _____

Sex Male Female **Lives at Home** Yes No

Date of Birth _____ **Religion** _____

Current School _____ **Current Grade** _____

Yes only (check) Baptism First Communion Confirmation

CHILD

Name _____
First *Middle* (*Last*)

Last Name (if different from Family Name) _____

Sex Male Female **Lives at Home** Yes No

Date of Birth _____ **Religion** _____

Current School _____ **Current Grade** _____

Yes only (check) Baptism First Communion Confirmation

CHILD

Name _____
First *Middle* (*Last*)

Last Name (if different from Family Name) _____

Sex Male Female **Lives at Home** Yes No

Date of Birth _____ **Religion** _____

Current School _____ **Current Grade** _____

Yes only (check) Baptism First Communion Confirmation

CHILD

Name _____
First *Middle* (*Last*)

Last Name (if different from Family Name) _____

Sex Male Female **Lives at Home** Yes No

Date of Birth _____ **Religion** _____

Current School _____ **Current Grade** _____

Yes only (check) Baptism First Communion Confirmation

OTHER

Name _____
First *Middle*

Last Name (if different from Family Name) _____

Sex Male Female **Lives at Home** Yes No

Date of Birth _____ **Religion** _____

Relationship _____

Yes only (check) Baptism First Communion Confirmation

OTHER

Name _____
First *Middle*

Last Name (if different from Family Name) _____

Sex Male Female **Lives at Home** Yes No

Date of Birth _____ **Religion** _____

Relationship _____

Yes only (check) Baptism First Communion Confirmation

Thank you for completing your family census update. Additional questions, comments, or concerns that you would like to pass on to the Pastor and the Pastoral Staff are welcome. Please use a separate piece of paper and include it with your form.