created 8/27/13

_____

LAST NAME

ST. ALPHONSUS / ST. TERESA / ST. JAMES PARISH 2013 CENSUS

(Circle your Church)

LAST NAME:_____**DATE**_____ **Do you have envelopes? YES/NO If yes, Envelope #**_____

ADDRESS:_____ _____, _____, _____

City State Zip Code

MAILING ADDRESS:_____, _____, _____, _____

(If different from above) City State Zip Code

Official Use Only:

New_____ Date_____

Revised_____Date_____

Notes:_____

_____

Were you married in the Catholic Church? YES/NO Was your marriage blessed in the Catholic Church? YES/NO Date of Marriage_____

_____**MARRIED**_____**SINGLE** _____ **SEPARATED** _____**DIVORCED** _____**WIDOWED** _____**RELIGIOUS**

Are you homebound? YES/NO Do you have any special needs? YES/NO If yes, explain (use the back if needed):_____

Do you/your family need transportation? YES/NO

Circle the number(s) you want on the phone call program for parish announcements.

NAME List all in your household including the person filling out this form.	**Relationship**	**Date of Birth**	**Baptized Catholic**	**First Communion**	**Confirmation**	**Highest Grade In School**	**Denomination**	**Occupation**	**Interests/ Hobbies**	**Cell Phone**	**Home Phone**	**Email Address**
		/ /	Y N	Y N	Y N							
			Y N	Y N	Y N							
			Y N	Y N	Y N							
			Y N	Y N	Y N							
			Y N	Y N	Y N							
			Y N	Y N	Y N							
			Y N	Y N	Y N							
			Y N	Y N	Y N							