

Our Lady of the Assumption Parish 2015 Census Form

P.O. Box G, Coral, PA 15731 —724-479-9542— www.olaparishpa.org

<i>Office Use Only</i>	
Date Rec'd _____	New Parishioner _____
Envelope # _____	Census Return _____

FAMILY INFORMATION			
FAMILY (LAST) NAME	EMAIL		HOME PHONE
STREET ADDRESS			CELL PHONE (HEAD OF HOUSEHOLD)
CITY	STATE	ZIP	CELL PHONE (OTHER-IDENTIFY)

HEAD OF HOUSEHOLD AND SPOUSE (if married)			
NAME	MALE	FEMALE	
BIRTHDATE			
OCCUPATION			
MARITAL STATUS	<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Divorced (If divorced, see back)		<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Divorced (If divorced, see back)
MARRIAGE LOCATION	CHURCH	CITY	STATE
ARE YOU CATHOLIC	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Convert		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Convert
OTHER RELIGION			
SACRAMENTS	<input type="checkbox"/> Baptism <input type="checkbox"/> 1 st Communion <input type="checkbox"/> Confirmed		<input type="checkbox"/> Baptism <input type="checkbox"/> 1 st Communion <input type="checkbox"/> Confirmed

CHILDREN UNDER 18 YEARS OF AGE					
NAME (include last name if different from family name)	SEX	BIRTHDATE MM/DD/YY	GRADE	SCHOOL	CIRCLE SACRAMENTS RECEIVED
					1 st Baptism Communion Confirmed
					1 st Baptism Communion Confirmed
					1 st Baptism Communion Confirmed
					1 st Baptism Communion Confirmed
					1 st Baptism Communion Confirmed
					1 st Baptism Communion Confirmed

OTHER HOUSEHOLD MEMBERS 18 YEARS OF AGE AND OLDER					
FULL NAME	RELATIONSHIP TO HEAD OF HOUSEHOLD	BIRTHDATE MM/DD/YY	RELIGION	OCCUPATION	CIRCLE SACRAMENTS RECEIVED
					1 st Baptism Communion Confirmed
					1 st Baptism Communion Confirmed
					1 st Baptism Communion Confirmed
					1 st Baptism Communion Confirmed

Additional notes/comments may be made on the back of this form

IF DIVORCED:

NAME	<input type="checkbox"/> Not remarried <input type="checkbox"/> Marriage was Civil marriage <input type="checkbox"/> Prior Catholic Marriage, then divorced, then Civil Marriage <input type="checkbox"/> Other church Marriage Comments:
------	---

NAME	<input type="checkbox"/> Not remarried <input type="checkbox"/> Marriage was Civil marriage <input type="checkbox"/> Prior Catholic Marriage, then divorced, then Civil Marriage <input type="checkbox"/> Other church Marriage Comments:
------	---

ADDITIONAL NOTES/COMMENTS: