

ST MARY'S CHURCH  
39 WALNUT ST  
ONEONTA, NY 13846  
(607)432-3920/ www.stmarysoneonta.org

CENSUS FORM

\_\_\_\_\_ New Registration

\_\_\_\_\_ Previously Registered

Family Name: \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Marital Status: \_\_\_\_\_ Married

\_\_\_\_\_ Single

\_\_\_\_\_ Divorced

\_\_\_\_\_ Separated

\_\_\_\_\_ Widow/ Widower

If married, were you married in the Catholic Church:

YES

NO

Head of Household

Spouse

*(please indicate wife's maiden name)*

Name: \_\_\_\_\_

\_\_\_\_\_

Date of Birth: \_\_\_\_\_

\_\_\_\_\_

Occupation: \_\_\_\_\_

\_\_\_\_\_

Religion: \_\_\_\_\_

\_\_\_\_\_

Baptism: YES NO

Baptism: YES NO

First Communion: YES NO

First Communion: YES NO

Confirmation: YES NO

Confirmation: YES NO

OTHER HOUSEHOLD MEMBERS (Please include college age/ elderly)

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| NAME | DOB | RELIGION | BAPTISM | 1 <sup>ST</sup> COMM. | CONFIRMATION | SCHOOL |
|------|-----|----------|---------|-----------------------|--------------|--------|
|      |     |          |         |                       |              |        |
|      |     |          |         |                       |              |        |
|      |     |          |         |                       |              |        |
|      |     |          |         |                       |              |        |
|      |     |          |         |                       |              |        |
|      |     |          |         |                       |              |        |

**Please answer the following questions:**

1. Do you currently receive our Diocesan newspaper, The Evangelist?      \_\_\_\_\_ yes      \_\_\_\_\_ no
2. If "NO", would you like to receive The Evangelist?      \_\_\_\_\_ yes      \_\_\_\_\_ no

**\*\*\*Please mail this form, along with the "Time and Talent" form, back to us in the envelope provided or place it in the collection basket.**

**Thank You!**