



HOLY SPIRIT CENSUS SHEET

Date _____

OFFICE USE:
Entered on _____
Envelope # _____

FAMILY INFO:

Last name: _____

Address: _____

Home phone: _____

Cell phone (M): _____

Cell phone (F): _____

E-mail address: _____

Please check the best way(s) to contact you.
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CONTRIBUTION INFO:

Do you want to receive contribution envelopes? Y/N or Electronic Fund Transfer? Y/N

INDIVIDUAL INFO:

Man's name: _____ Occupation: _____

Date of birth: _____ Religion (if not Catholic) _____

Have you received these sacraments:

Baptism Y/N

Eucharist Y/N

Confirmation Y/N

Woman's name: _____ Occupation: _____

Maiden name: _____

Date of birth: _____ Religion (if not Catholic) _____

Have you received these sacraments:

Baptism Y/N

Eucharist Y/N

Confirmation Y/N

CHILDREN: (19 or under living at home)

Sacraments received (Y/ N)

Full name	DOB	M/F	Grade & School	Baptism	Eucharist	Confirmation
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Would you like to meet with our parish priest? Y/N

Would you be interested in serving in a ministry at Mass? If so, please call the parish office, 534-6623.