## **HOLY ROSARY CONFIDENTIAL CENSUS DATA**

44450 Highway 429 - St. Amant, LA 70774-4510 - (225) 647-5321

FAMILY NAME				STREET ADDRESS							CITY, STATE, ZIP				Please Check if you wish to use:			
														Envelopes				
															Electronic Fund Transfer			
WIFE'S MAIDEN NAME				E-MAIL ADDRESS TELE				PHONE MAILING				G ADDRESS			OFFICE	USE O	NLY	
									(If diff	ferent from Street Address, e.g. P.O. Box)					Family ID:			
Please Print or Type (A) RELIGION			(B) MARITAL STATUS				S	(C) MASS ATTENDANCE					CIAL SITU	Entered:				
1. Catholic		Catholic Marriage					1. Weekly			1. Blind			1					
We are a <u>Stewardship</u> 2. Baptist		2. Other Church Marrigage					2. Twice a Month			2. Deaf			Updated:					
<u>Parish</u> - All members 3. Congregational		3. Civil Marriage					3. Monthly			3. Mental Handicap								
are expected to parti-  4. Episcopalian		4. Single					4. Seldom			4. Physical Handicap			Deleted:					
cipate in Stewardship 5. Lutheran		5. Separated					5. Do Not Attend			5. Shut In								
of MINISTRY, PRAYER 6. Methodist		6. Divorced											Funds:	Υ	N			
and FINANCE 7. Presbyterian		7. Widowed																
ļ		8. Other	Select	t a number	from key	, ahove f	or "Δ" "R"	, "C" and "[	)"									
			Ocicci	andinber	(A)	above	First	First	Con-	(B)		(C)	(D)					
	First Name and Middle Initial (Include last name if different		Sex	Birth	Religion	Baptized		Communion	firmed	Marital	Marriage	Mass	Special	occui	PATION Work Phone		ork	
			(M-F)	Date	(1-8)	(Y-N)	(Y-N)	(Y-N)	(Y-N)	Status	Date	Attend.	Situation					
from family name)		, ,		,	, ,	` ,	, ,	, ,	(1-7)		(1-5)	(1-5)						
1																		
2																		
ADULTS - 18 years or older residing at above address (including last name if different from family name)																		
3																		
4																		
CHILDREN - (include last name if different fr		rom family name)								School				Grade	PSR			
5																		
6																		
7							_		_									
8																		

COMMENTS:

REV: 03/2009 Census Form.xls Use back of form for any additional information.