

Holy Disciples Parish Census Form – St. John the Evangelist Office 21 Academy Hill, Watertown, CT 06795 Date: __/__/__

Family Last Name _____ Telephone _____ Check Here if Unlisted ☐

Street Address _____ Town _____ State _____ Zip _____

Mailing Address, if different: _____ Town _____ State _____ Zip _____

Would you like to receive Offertory Envelopes? YES or NO Family e-mail address _____@_____

Names of all household members – including last name if different	Date of birth	Religion	Sex M/F	Baptized Y/N	First Comm. Y/N	Con-firmed Y/N	Attends Mass (weekly, No, occasionally)	Occupation
Head of Household:								
Spouse:								

Married ☐ by Priest or Deacon yes ☐ no ☐ Separated ☐ Divorced ☐ Widow/er ☐ Single ☐

Children & others living here:	Date of birth	Religion	Sex M/F	Baptized Y/N	First Comm. Y/N	Con-firmed Y/N	Attends Mass (weekly, No, occasionally)	Occupation

Is there anyone at home with special needs? Name _____ Type of Need _____