Office Use Only:
Date Entered: _____.
ID/Envelope #: _____.
Bulletin Notice:

# GUARDIAN ANGELS PARISH CENSUS FORM

**Instructions for Completing this Census:**

1. Each family is asked to complete the form. Individuals out of school and living at home are to complete their own from.
2. Please complete the information as completely as possible
3. Please PRINT neatly.
4. Your information will be kept confidential.
5. When the form is completed you can drop it off at the Parish Office or email it to: office@copleyangels.org.

## Family Details:

| | | | | |
|---|---|---|---|---|
| **Surname:** | | | | |
| **Address:** | | | | |
| **CityStateZip:** | | | | |
| **Phone:** | Listed | | Unlisted | |
| **Cell Phone:** | | | | |
| **Email:** | | | | |

## Adult Family Members Details:

| | **Head of Household** | | | | **Spouse/Other Adult** | | | |
|---|---|---|---|---|---|---|---|---|
| **Title: Mr./Mrs./Miss** | | | | | | | | |
| **First Name** | | | | | | | | |
| **Last Name/*Maiden Name** | | | | | * | | | . |
| **Date of Birth** | | | | | | | | |
| **Married/Single** | Married | | Single | | Married | | Single | |
| **Occupation** | | | | | | | | |
| **Religion** | | | | | | | | |
| **Sacraments** | Baptism | | Confirmation | | Baptism | | Confirmation | |
| **(Check all that apply)** | Eucharist | | Marriage | | Eucharist | | Marriage | |
| | **Church of Marriage:** | | | | | | | |
| **Ministries** | Reader | | Music | | Reader | | Music | |
| **(Check all that apply)** | Eucharistic Minister | | | | Eucharistic Minister | | | |
| | Ministry to the Sick | | | | Ministry to the Sick | | | |
| | Others: | | | | Others: | | | |

## Dependent Family Members Details:

| **Name** | **Date of Birth** | **Baptism** | **Eucharist** | **Confirmation** |
|---|---|---|---|---|
| | | | | |
| | | | | |
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**PLEASE LET US KNOW IF YOU WOULD LIKE TO RECEIVE ENVELOPES** **YES** ☐ **NO** ☐

REGISTRATION FORM: Revised 7.15.26