GUARDIAN ANGELS PARISH CENSUS FORM

Office Use Only
Date Entered:
ID/Envelope #:

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.

Family Details:

- 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@GuardianAngels-Copley.org.

i diffinity 2 ordanis:			
Surname:			
Address:			
CSZ:			

Phone: Listed Unlisted

Cell Phone:

Email:

Adult Family Members Details:

Addit I dillily McIliber	5 Details:						
	Head of Household			Spouse/Othe	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 Min	Eucharistic Minister			
	Ministry to the Sick		Ministry to the	Ministry to the Sick			
	Others:		Others:	Others:			

Dependent Family Members Details:

2 openaent ranni	, 1101115015 2 0 001151			
Name	Date of Birth	Baptism	Eucharist	Confirmation

PLEASE LET US KNOW IF YOU WOULD LIKE TO RECEIVE ENVELOPES

YES	NO	