

Holy Ghost Parish Census 2014

Family Name:		Date Membership Commenced:	
Adult #1	Male__ Female__	Marital Status:	
Name:		Married __ Single __ Divorced __ Widowed __ Other __	
Occupation:		Cell #:	
		Email:	
Adult #2	Male __ Female __	Marital Status:	
Name:		Married __ Single __ Divorced __ Widowed __ Other __	
Occupation:		Cell #:	
		Email:	
Home Address:		Mailing Address: (if applicable)	
Home Phone:		Stewardship:	
Home Email:		Would you and/or a member of your household be willing to use their skills to help the church if a need arises? Who? How?	
Children: (at home, please)	Grade	Parish Support: (please check one) I currently use envelopes ____ I would like to receive envelopes ____ I am currently enrolled in online giving __ I would like to sign up for online giving __ No Thanks ____	
1.			
2.			
3.			
4.			
5.			
I have child/ren attending SF/HG School: Y / N			
Other Members of the Household:		Protecting God's Children:	
Name:		I have taken Protecting God's Children	
Phone:		Husband ____	
Name:		Wife ____	
Phone:		Other ____	
Catholic Times:		I would like to sign up ____	
I receive the Catholic Times ____		Questions/Comments:	
I would like to receive the Catholic Times ____			
No Thanks ____			
Date Completed:		Completed By:	