

PAROISSE ST. LOUIS PARISH

Box 8120

Bonnyville, AB T9N 2J4

**Census Form**

Personal Information

Family Name:	Reg. Date:
Mailing Name:	Home Phone:
Mailing Address:	Home Fax:
City/Prov/Postal:	Mass of Choice:

For Each Family Member, list the details on each person, start with the Envelope Holder, include all children, or other relatives living in the same household/family.

	Family Member	Family Member	Family Member	Family Member
Last Name				
First Name				
Middle Names				
Gender M / F	<input type="checkbox"/> Male/ <input type="checkbox"/> Female	<input type="checkbox"/> Male/ <input type="checkbox"/> Female	<input type="checkbox"/> Male/ <input type="checkbox"/> Female	<input type="checkbox"/> Male/ <input type="checkbox"/> Female
Date of Birth <small>yyyy/mm/dd</small>	<small>yyyy/mm/dd</small>	<small>yyyy/mm/dd</small>	<small>yyyy/mm/dd</small>	<small>yyyy/mm/dd</small>
Marital Status				
Family Relation				
Parishioner (Y/N)	<input type="checkbox"/> Yes/ <input type="checkbox"/> No	<input type="checkbox"/> Yes/ <input type="checkbox"/> No	<input type="checkbox"/> Yes/ <input type="checkbox"/> No	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
Envelope#				
Religion				
Occupation				
Bus. Phone				
Bus. Fax				
Cell Phone				
School + Grade				
Email Address				
Maiden Name	<input type="checkbox"/> Living at home	<input type="checkbox"/> Living at home	<input type="checkbox"/> Living at home	<input type="checkbox"/> Living at home