

Saint Dominic Parish Census

(For Office Use Only)

Envelope Number _____

Date ____/____/____

Faith Direct _____

Family Last Name

Are you registered at another church? Yes No
If Yes, where?: _____

Primary Residence

Seasonal Residence Date ____/____/____ to ____/____/____

Street Address

Street Address

City	Zip	Phone: _____
		Cell: _____
		Email: _____

City	Zip	Phone: _____
		Cell: _____
		Email: _____

Head of Household

Title: Mr./Mrs., Mr., Mrs., Ms., Dr., Rev.

Baptismal Name _____ Goes By _____ Maiden Name _____

Date of Birth ____/____/____

Education Completed: High School College
Graduate Technical

Field of Study: _____

Occupation: Retired
Employer: Unemployed

Position / Type of Work _____

Religion Denomination _____

Baptized Yes No
Communion Yes No
Confirmation Yes No
Convert Yes No

Are you interested in becoming Catholic?
 Yes No

Marital Status Single
Married Date ____/____/____
Separated
Divorced
Annulled Date ____/____/____
Widowed

Were you married by a Priest? Yes No
Where/What Parish? _____

Spouse

Title: Mr./Mrs., Mr., Mrs., Ms., Dr., Rev.

Baptismal Name _____ Goes By _____ Maiden Name _____

Date of Birth ____/____/____

Education Completed: High School College
Graduate Technical

Field of Study: _____

Occupation: Retired
Employer: Unemployed

Position / Type of Work _____

Religion Denomination _____

Baptized Yes No
Communion Yes No
Confirmation Yes No
Convert Yes No

Are you interested in becoming Catholic?
 Yes No

Marital Status Single
Married Date ____/____/____
Separated
Divorced
Annulled Date ____/____/____
Widowed

Were you married by a Priest? Yes No
Where/What Parish? _____

Other Family Members

First name (and last if different from family name)	Birthdate	Baptized	Communion	Confirmed	Present School and Grade or Employer
1.	/ /	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.	/ /	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.	/ /	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4.	/ /	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5.	/ /	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6.	/ /	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Education (continued on side two)

First name (and last if different from family name)	Saint Dominic Elementary School Graduation Year:	Saint Dominic High School Graduation Year:	Religious Education Attending: <input type="checkbox"/> Yes <input type="checkbox"/> No
1.	/ /	/ /	
2.	/ /	/ /	
3.	/ /	/ /	

Education (continued from side one)

First name (and last if different from family name)	Saint Dominic Elementary School Graduation Year:	Saint Dominic High School Graduation Year:	Religious Education Attending: <input type="checkbox"/> Yes <input type="checkbox"/> No
4.	/ /	/ /	
5.	/ /	/ /	
6.	/ /	/ /	

Saint Dominic Parish Census (continued)

Languages spoken at home: _____

Is anyone Homebound? _____

Are there any Special Needs? _____

Please list if anyone in your household serves on a Parish Committee or Ministry:

Please list if anyone in your household is an Alum(i) of the Elementary School or High School (please include graduation year):

I have a particular talent or professional service I would like to offer:

Please list any Clubs, Boards or Committees you serve on outside the Parish:

I/We will support the Parish with a monetary gift, either:

- Weekly, using envelopes returned at Weekend Mass
- Faith Direct, automatic online weekly or monthly deduction
- Monthly, by responding to monthly mailings

Emergency Contact Name and Phone Number (adult child or parent living outside this residence)

Instructions: 1. Please print 2. Fill in as completely as possible 3. Return to office by mail, collection basket, or in person

The information provided by you in this form, is used by the staff of Saint Dominic Parish to better serve you. All information is kept in the strictest confidence. If you have any comments, please call: 516.922.4488