

ST. GERARD MAJELLA PARISH CENSUS FORM

HEAD OF HOUSEHOLD

Please Print

Date Completed: ___/___/___

Last Name: _____ Middle Initial _____ First Name: _____

Street Address: _____ Apartment #: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Unlisted: ___ (Yes/No) Cell: _____

Send Envelopes: _____ (Yes/No) Date of Birth: ___/___/___

Marital Status: _____ (Unmarried, Married, Separated, Divorced, Widowed) Date of Marriage: ___/___/___

Occupation: _____ Employed: ___ (Yes/No) Education Level: _____ (K-12, HS, 13-16,

Spouse (If applicable)

First Name: _____ Middle Initial _____ Last Name (if different from Family Name) _____

Sex: _____ (Male/Female) Date of Birth: ___/___/___

Occupation: _____ Employed: ___ (Yes/No)

Education Level: _____ (K-12, HS, 13-16, C)

OVER

Member #3

Title: (Mr., Mrs., Miss, Ms.) First Name: _____ Middle Initial _____ Last Name (if different from Family Name) _____

Sex: _____ (Male/Female) Date of Birth: ____/____/____

Education Level: _____ (K-12, HS, 13-16, C) School: _____

Member #4

Title: (Mr., Mrs., Miss, Ms.) First Name: _____ Middle Initial _____ Last Name (if different from Family Name) _____

Sex: _____ (Male/Female) Date of Birth: ____/____/____

Education Level: _____ (K-12, HS, 13-16, C) School: _____

Member #5

Title: (Mr., Mrs., Miss, Ms.) First Name: _____ Middle Initial _____ Last Name (if different from Family Name) _____

Education Level: _____ (K-12, HS, 13-16, C) School: _____
