



Parishioner Census Form

Constituent # _____

Office use Only	
<input type="checkbox"/>	New Parishioner
<input type="checkbox"/>	Change of Information
<input type="checkbox"/>	Register as Non-Active

Head of Household Married Single Widow(er)

Full Name: _____ DOB: _____

Address: _____

City/State: _____ Zip: _____

Phone #: _____ Cell #: _____

Email: _____

Spouse

Full Name: _____ DOB: _____

Cell #: _____

Children

Full Name: _____ DOB: _____

Full Name: _____ DOB: _____

Full Name: _____ DOB: _____

Full Name: _____ DOB: _____

*Please note any additional names on reverse side.

Other in Household:

Full Name: _____ DOB: _____

Relationship: _____

Mailing Instructions

Would you like to receive offering envelopes? Yes No

Would you like to receive mailings? Yes No

Where would you like your mail delivered? Home Other

Address: _____

All information is CONFIDENTIAL.
St. Francis of Assisi Church can not distribute or duplicate.

