

St. Vincent de Paul Church
Parish Census 2017

Please Print

Env. # _____

Head of Household

Spouse

Last Name _____
 First Name _____
 Middle Name _____
 Suffix _____
 Title _____
 Birth Date _____
 Gender Male ___ Female ___
 Language _____
 Ethnicity _____
 Occupation _____
 Religion _____
 Baptism Yes ___ No ___
 1st Comm Yes ___ No ___
 Confirmation Yes ___ No ___

Last Name _____
 First Name _____
 Middle Name _____
 Maiden Name _____
 Title _____
 Birth Date _____
 Gender Male ___ Female ___
 Language _____
 Ethnicity _____
 Occupation _____
 Religion _____
 Baptism Yes ___ No ___
 1st Comm Yes ___ No ___
 Confirmation Yes ___ No ___

Marital Status Single ___ Married ___ Divorced ___ Widowed ___
 Catholic Marriage Yes ___ No ___

| | | | |
|---------------|-------------------|------------|-------------------------|
| Phone Numbers | Head of Household | Home _____ | Unlisted Yes ___ No ___ |
| | Head of Household | Cell _____ | Unlisted Yes ___ No ___ |
| | Spouse | Cell _____ | Unlisted Yes ___ No ___ |

Emergency Contact Name _____ Phone _____ Unlisted Yes ___ No ___

| | | | |
|--------|-------------------|-------|-----------------------------|
| E-Mail | Head of Household | _____ | Confidential Yes ___ No ___ |
| | Spouse | _____ | Confidential Yes ___ No ___ |

Physical Address Street Address Line 1 _____
 Street Address Line 2 _____
 City & State _____ Zip _____

Mailing/Alternate Address Mailing Address Line 1 _____
 Mailing Address Line 2 _____
 City & State _____ Zip _____

Other Members
(age 18 & under)

No. 1
Last Name _____
First Name _____
Middle Name _____
Birth Date _____
Relationship _____
(child/grandchild/niece/nephew/etc.)
Gender Male ___ Female ___
e-mail _____
Religion _____
Baptism Yes ___ No ___
1st Communion Yes ___ No ___
Confirmation Yes ___ No ___

No. 2
Last Name _____
First Name _____
Middle Name _____
Birth Date _____
Relationship _____
(child/grandchild/niece/nephew/etc.)
Gender Male ___ Female ___
e-mail _____
Religion _____
Baptism Yes ___ No ___
1st Communion Yes ___ No ___
Confirmation Yes ___ No ___

No. 3
Last Name _____
First Name _____
Middle Name _____
Birth Date _____
Relationship _____
(child/grandchild/niece/nephew/etc.)
Gender Male ___ Female ___
e-mail _____
Religion _____
Baptism Yes ___ No ___
1st Communion Yes ___ No ___
Confirmation Yes ___ No ___

No. 4
Last Name _____
First Name _____
Middle Name _____
Birth Date _____
Relationship _____
(child/grandchild/niece/nephew/etc.)
Gender Male ___ Female ___
e-mail _____
Religion _____
Baptism Yes ___ No ___
1st Communion Yes ___ No ___
Confirmation Yes ___ No ___

Note: Additional members can be added on separate form

We would like to volunteer for the following skills/talents:

- | | | |
|---|---|--|
| <input type="checkbox"/> Arts/Crafts | <input type="checkbox"/> Baking/Cooking | <input type="checkbox"/> Carpentry |
| <input type="checkbox"/> Clerical | <input type="checkbox"/> Creative Writing | <input type="checkbox"/> Computer/Technology |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Grounds (Church) | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> General Maintenance | <input type="checkbox"/> Heating/Cooling/Plumbing | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Masonry | <input type="checkbox"/> Mechanical | <input type="checkbox"/> Medical |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Photography | <input type="checkbox"/> Teaching |
| <input type="checkbox"/> Communication Skills | <input type="checkbox"/> Videography | <input type="checkbox"/> Other _____ |
-

We would like to volunteer for the following ministries:

- | | | |
|--|---|--|
| <input type="checkbox"/> Administrative/Clerical | <input type="checkbox"/> Altar Server | <input type="checkbox"/> Altar Society |
| <input type="checkbox"/> Baptism Preparation | <input type="checkbox"/> Bereavement/Funeral | <input type="checkbox"/> Bible Study |
| <input type="checkbox"/> Choir | <input type="checkbox"/> Church Cleaning | <input type="checkbox"/> Communion Minister |
| <input type="checkbox"/> Youth Ministry | <input type="checkbox"/> SVDP Society/Pantry | <input type="checkbox"/> Usher/Greeter |
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> Lector/Reader | <input type="checkbox"/> Story-Telling |
| <input type="checkbox"/> Marriage Preparation | <input type="checkbox"/> Money Counter | <input type="checkbox"/> Musician |
| <input type="checkbox"/> Religious Education (CCD) | <input type="checkbox"/> Adult Rel. Edu. (RCIA) | <input type="checkbox"/> Sacristan |
| <input type="checkbox"/> Vocations Ministry | <input type="checkbox"/> Pro-Life Ministry | <input type="checkbox"/> Knights of Columbus |

Please let us know how we can be more supportive of you and your family:

- Building family traditions
- Family prayer resources
- Doing service for others as a family
- Making moral decisions in our family
- Family counseling resources
- Health/medicals
- Domestic violence
- Special needs/disabilities
- Aging issues
- Generational gaps
- Incarceration
- Death/loss/grief/suicide
- Support for our marriage
- Immigration issues
- Websites, books & family resources
- Parent support group
- Support for single parents
- Support for blended families
- Step children
- Teen dating/adolescent sexuality
- Need a parent support group
- Teen behavior/attitude
- Alcoholism/drug abuse/addiction issues
- Divorce issues
- Emotional/psychological
- Economic
- Stress/time management
- Financial education
- Talking about faith & morals at home

Other _____

Thank you for participating in our parish census. May God bless you and your family, and know that our love, prayers, and support are with you.