



PARISH CENSUS UPDATE

SAINT FRANCIS OF ASSISI PARISH

101 W. Church Ave.
Masontown, PA 15461
Phone: 724-583-7866 / Fax: 724-583-0373
www.sfoafayette.org

[] New Registration
[] Update Registration

Envelope # _____

Family Name: _____ Home Phone: _____ unlisted: Yes No
(How you would like it to appear on your envelopes)

Address: _____ City/State: _____ Zip: _____

E-mail: _____ Cell Phone: _____

MARITAL STATUS

Single _____ Widowed _____ Divorced _____ Church Marriage _____ Civil Marriage _____

Date of Marriage: _____ Location of Marriage: _____

Head of Household:

Spouse: (include Maiden name)

Name: _____

Name: _____

Date of Birth: _____

Date of Birth: _____

Place of Birth: _____

Place of Birth: _____

Religion: _____

Religion: _____

Occupation: _____

Occupation: _____

Father's Name _____

Father's Name _____

Mother's Name _____

Mother's Name _____

Mother's Maiden Name _____

Mother's Maiden Name _____

Baptism: Yes No Date: _____

Baptism: Yes No Date: _____

Church of Baptism: _____

Church of Baptism: _____

1st Communion: Yes No Date: _____

1st Communion: Yes No Date: _____

Church of 1st Communion: _____

Church of 1st Communion: _____

Confirmation: Yes No Date: _____

Confirmation: Yes No Date: _____

Church of Confirmation: _____

Church of Confirmation: _____

CHILDREN (under age of 18; age 18 & up, fill out separate registration)

Name: _____	Name: _____
Date of Birth: _____	Date of Birth: _____
Place of Birth: _____	Place of Birth: _____
<input type="checkbox"/> Female <input type="checkbox"/> Male Grade: _____	<input type="checkbox"/> Female <input type="checkbox"/> Male Grade: _____
School Attending: _____	School Attending: _____
Baptism: Yes No Date: _____	Baptism: Yes No Date: _____
Church of Baptism: _____	Church of Baptism: _____
1st Communion: Yes No Date: _____	1st Communion: Yes No Date: _____
Church of 1st Communion: _____	Church of 1st Communion: _____
Confirmation: Yes No Date: _____	Confirmation: Yes No Date: _____
Church of Confirmation: _____	Church of Confirmation: _____

Name: _____	Name: _____
Date of Birth: _____	Date of Birth: _____
Place of Birth: _____	Place of Birth: _____
<input type="checkbox"/> Female <input type="checkbox"/> Male Grade: _____	<input type="checkbox"/> Female <input type="checkbox"/> Male Grade: _____
School Attending: _____	School Attending: _____
Baptism: Yes No Date: _____	Baptism: Yes No Date: _____
Church of Baptism: _____	Church of Baptism: _____
1st Communion: Yes No Date: _____	1st Communion: Yes No Date: _____
Church of 1st Communion: _____	Church of 1st Communion: _____
Confirmation: Yes No Date: _____	Confirmation: Yes No Date: _____
Church of Confirmation: _____	Church of Confirmation: _____

Name: _____	Name: _____
Date of Birth: _____	Date of Birth: _____
Place of Birth: _____	Place of Birth: _____
<input type="checkbox"/> Female <input type="checkbox"/> Male Grade _____	<input type="checkbox"/> Female <input type="checkbox"/> Male Grade _____
School Attending: _____	School Attending: _____
Baptism: Yes No Date: _____	Baptism: Yes No Date: _____
Church of Baptism: _____	Church of Baptism: _____
1st Communion: Yes No Date: _____	1st Communion: Yes No Date: _____
Church of 1st Communion: _____	Church of 1st Communion: _____
Confirmation: Yes No Date: _____	Confirmation: Yes No Date: _____
Church of Confirmation: _____	Church of Confirmation: _____