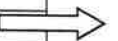


The Church of Saint Anselm Census Information

Please print clearly

Self				Spouse					
Last Name	First Name	M.I.	Maiden Name	Last Name	First Name	M.I.	Maiden Name		
Nickname	Preferred Salutation (Mr.; Mrs.; Ms.; Miss; Dr.)	Date of Birth		Nickname	Preferred Salutation (Mr.; Mrs.; Ms.; Miss; Dr.)	Date of Birth			
Religion	Occupation	Nationality		Religion	Occupation	Nationality			
E-Mail	Work Phone	Cell Phone		E-Mail	Work Phone	Cell Phone			
Church Attendance: <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Occasional <input type="checkbox"/> Seldom				Church Attendance: <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Occasional <input type="checkbox"/> Seldom					
Sacramental History Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No First Eucharist? <input type="checkbox"/> Yes <input type="checkbox"/> No Confirmed? <input type="checkbox"/> Yes <input type="checkbox"/> No				Sacramental History Baptized? <input type="checkbox"/> Yes <input type="checkbox"/> No First Eucharist? <input type="checkbox"/> Yes <input type="checkbox"/> No Confirmed? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed									
Wedding Date		Place of Marriage (e.g., St. Mary's Church; Cleveland City Hall, etc.)			City & State of Marriage				
Stewardship: Would you like <input type="checkbox"/> Weekly Envelopes <input type="checkbox"/> Monthly Envelopes				Would you like information on Automatic Gifting? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Home Address		Apt. #		Mailing Address (if different)		Apt. #			
City		Zip		City		Zip			
Home Phone				E Mail					
Child(ren) living at home or at college. (Adult children not in school and other adults living in the home should register separately.)									
Child's Name (including last, if different from above)	Nickname	Date of Birth	Gender	Baptized?	Church of Baptism and date (if known)	1 st Comm?	Confirmed?	Current Religious Ed?	Present School and Grade
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Cath School <input type="checkbox"/> PSR <input type="checkbox"/> None	
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Cath School <input type="checkbox"/> PSR <input type="checkbox"/> None	
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Cath School <input type="checkbox"/> PSR <input type="checkbox"/> None	
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Cath School <input type="checkbox"/> PSR <input type="checkbox"/> None	
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Cath School <input type="checkbox"/> PSR <input type="checkbox"/> None	
			<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Cath School <input type="checkbox"/> PSR <input type="checkbox"/> None	
Office Use Only: Date Registered: _____ Envelope # _____ <input type="checkbox"/> C <input type="checkbox"/> W <input type="checkbox"/> M <input type="checkbox"/> I									

OVER



Needs & Interests

Please check all that apply

1. ☐ A member of our family is unable to attend Mass and would like to receive Communion at home.
 2. ☐ Would like information on Bereavement Support Groups.
 3. ☐ A member of our family would like information on becoming Catholic.
 4. ☐ _____ (list first name) would like a Priest or Pastoral Minister to call.
 5. Saint Anselm Day School
☐ Send information ☐ Preschool ☐ K-Gr. 8
☐ Send registration forms ☐ Preschool ☐ K-Gr. 8
 6. Saint Anselm PSR (Parish School of Religion)
(Grades 1 through 8)
 - A. What do you value about Saint Anselm? _____

 - B. Your concerns are important to us. How can we serve you better? _____

 - C. What would enhance your faith and involvement? _____

- ☐ Send information ☐ Send registration forms
 7. ☐ Would like to enroll child(ren) in Preschool Sunday School (Ages 3-5)
 8. ☐ Would like information about an Annulment.
 9. ☐ _____ (list first name) is a Eucharistic Minister.
 10. ☐ _____ (list first name) would like information on becoming a Eucharistic Minister.
 11. ☐ _____ (list first name) is a Lector.
 12. ☐ _____ (list first name) would like information on becoming a Lector.