

ARCHDIOCESE OF WASHINGTON

CENSUS

CONFIDENTIAL

Registration Form

Mailing address:

Mr. & Mrs./Ms., etc.

First name

Initial

Last name

Number

Mailing address

Apt.

City

State

Zip

Area

Phone

number

Check here if unlisted

Street Address (Only if different from Mailing Address)

Is the home Owned?
 Rented?

How long at this address?

6 or more years
 1-5 years
 Moved in this year

Where do you/your family attend Church? _____

Office use

If you do not regularly attend any one church, check here

In which parish are you registered? _____

Office use

If not registered anywhere, check here

If registered, do you have church collection envelopes? Yes No

If yes, envelope number

If no, do you wish to have them? Yes No

Language spoken at home, if other than English _____

Do Not Write Below This Line. For Office Use Only

Who filled out this form?

- Parishioner/member of the household.
- Parish staff/office from general information
- Parish staff/office from interview

Date form completed

Mo

Yr

Parish code

- New household
- Update/correction

E

Questions

Individual 1

In this column, please provide information about the person in whose name the home is owned or rented. If there is more than one such person (e.g. husband and wife) choose one of them. If there is no such person, fill out this column for any adult household member.

1. Last name

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LAST NAME

2. First name and middle initial

--	--	--	--	--	--	--	--	--	--	--	--	--	--

FIRST NAME

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INITIAL

3. How is this person related to individual 1?

--

4. Sex

Male

Female

5. Date of birth

--	--

Mo.

--	--

Day

--	--	--	--

Year

6. Is this person --

White

Asian

Black

Other

7. Is this person of Hispanic origin or descent?

Yes

No

8. Religion

Catholic

If Catholic, a convert?

Yes

No

Other (specify) _____

None

9. Has this person been baptized?

Yes

No

10. Has this person been confirmed?

Yes

No

11. How often does this person attend Mass?

More than weekly

Once a month

Weekly

Rarely

Does not attend

12. Marital status

Never married

Separated

Now married

Divorced

Widowed

13. If married, is the marriage recognized by the Catholic Church?

Yes

No

14. Grade of school completed (Circle the highest)

Elementary through high school
 1 2 3 4 5 6 7 8 9 10 11 12
 College (academic year)
 1 2 3 4 5 6 7 8 or more

15. If now attending school, what type of school?

Catholic

Public

Private non-Catholic

16. If not attending a Catholic school, is this person receiving formal religious instruction?

Yes

No

17. Is this person gainfully employed?

Full-time

Not employed

Part-time

Retired

18. Occupation

Individual 2

Questions answered for individual 1 should also be answered for individuals 2, 3 and 4.

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LAST NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

FIRST NAME

--	--

INITIAL

- | | |
|---|---|
| <input type="checkbox"/> Husband/Wife | <input type="checkbox"/> Father/Mother |
| <input type="checkbox"/> Son/Daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Brother/Sister | <input type="checkbox"/> Not related |

- | | |
|-------------------------------|---------------------------------|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female |
|-------------------------------|---------------------------------|

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Mo.

--	--

Day

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Year

- | | |
|--------------------------------|--------------------------------|
| <input type="checkbox"/> White | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Black | <input type="checkbox"/> Other |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | | |
|-----------------------------------|--------------|------------------------------|
| <input type="checkbox"/> Catholic | If Catholic, | <input type="checkbox"/> Yes |
| | a convert? | <input type="checkbox"/> No |

- | |
|--|
| <input type="checkbox"/> Other (specify) _____ |
| <input type="checkbox"/> None |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | |
|---|--|
| <input type="checkbox"/> More than weekly | <input type="checkbox"/> Once a month |
| <input type="checkbox"/> Weekly | <input type="checkbox"/> Rarely |
| | <input type="checkbox"/> Does not attend |

- | | |
|--|------------------------------------|
| <input type="checkbox"/> Never married | <input type="checkbox"/> Separated |
| <input type="checkbox"/> Now married | <input type="checkbox"/> Divorced |
| <input type="checkbox"/> Widowed | |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

Elementary through high school
 1 2 3 4 5 6 7 8 9 10 11 12
 College (academic year)
 1 2 3 4 5 6 7 8 or more

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> Catholic | <input type="checkbox"/> Public |
| | <input type="checkbox"/> Private non-Catholic |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | |
|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Full-time | <input type="checkbox"/> Not employed |
| <input type="checkbox"/> Part-time | <input type="checkbox"/> Retired |

Individual 3

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LAST NAME

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FIRST NAME

--	--

INITIAL

- | | |
|---|---|
| <input type="checkbox"/> Husband/Wife | <input type="checkbox"/> Father/Mother |
| <input type="checkbox"/> Son/Daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Brother/Sister | <input type="checkbox"/> Not related |

- | | |
|-------------------------------|---------------------------------|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female |
|-------------------------------|---------------------------------|

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Mo.

--	--

Day

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Year

- | | |
|--------------------------------|--------------------------------|
| <input type="checkbox"/> White | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Black | <input type="checkbox"/> Other |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | | |
|-----------------------------------|--------------|------------------------------|
| <input type="checkbox"/> Catholic | If Catholic, | <input type="checkbox"/> Yes |
| | a convert? | <input type="checkbox"/> No |

- | |
|--|
| <input type="checkbox"/> Other (specify) _____ |
| <input type="checkbox"/> None |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | |
|---|--|
| <input type="checkbox"/> More than weekly | <input type="checkbox"/> Once a month |
| <input type="checkbox"/> Weekly | <input type="checkbox"/> Rarely |
| | <input type="checkbox"/> Does not attend |

- | | |
|--|------------------------------------|
| <input type="checkbox"/> Never married | <input type="checkbox"/> Separated |
| <input type="checkbox"/> Now married | <input type="checkbox"/> Divorced |
| <input type="checkbox"/> Widowed | |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

Elementary through high school
 1 2 3 4 5 6 7 8 9 10 11 12
 College (academic year)
 1 2 3 4 5 6 7 8 or more

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> Catholic | <input type="checkbox"/> Public |
| | <input type="checkbox"/> Private non-Catholic |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | |
|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Full-time | <input type="checkbox"/> Not employed |
| <input type="checkbox"/> Part-time | <input type="checkbox"/> Retired |

Individual 4

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LAST NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

FIRST NAME

--	--

INITIAL

- | | |
|---|---|
| <input type="checkbox"/> Husband/Wife | <input type="checkbox"/> Father/Mother |
| <input type="checkbox"/> Son/Daughter | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Brother/Sister | <input type="checkbox"/> Not related |

- | | |
|-------------------------------|---------------------------------|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female |
|-------------------------------|---------------------------------|

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Mo.

--	--

Day

--	--	--	--

Year

- | | |
|--------------------------------|--------------------------------|
| <input type="checkbox"/> White | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Black | <input type="checkbox"/> Other |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | | |
|-----------------------------------|--------------|------------------------------|
| <input type="checkbox"/> Catholic | If Catholic, | <input type="checkbox"/> Yes |
| | a convert? | <input type="checkbox"/> No |

- | |
|--|
| <input type="checkbox"/> Other (specify) _____ |
| <input type="checkbox"/> None |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | |
|---|--|
| <input type="checkbox"/> More than weekly | <input type="checkbox"/> Once a month |
| <input type="checkbox"/> Weekly | <input type="checkbox"/> Rarely |
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- | | |
|--|------------------------------------|
| <input type="checkbox"/> Never married | <input type="checkbox"/> Separated |
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| <input type="checkbox"/> Widowed | |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
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Elementary through high school
 1 2 3 4 5 6 7 8 9 10 11 12
 College (academic year)
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- | | |
|-----------------------------------|---|
| <input type="checkbox"/> Catholic | <input type="checkbox"/> Public |
| | <input type="checkbox"/> Private non-Catholic |

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

- | | |
|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Full-time | <input type="checkbox"/> Not employed |
| <input type="checkbox"/> Part-time | <input type="checkbox"/> Retired |