

**ST. STEPEHN THE KING
Parish Census and Registration Form**

Date: _____

Family (or last) Name _____ Phone _____ Unlisted Yes No

Address _____ P O Box _____ City _____ Zip _____

Please PRINT below ONLY the names of those living in your household.

List adults living with you First Name M.I. Last Name	Relationship (Head of Household, Husband, Wife, Son, Daughter, Aunt, etc.)	Date of Birth Mo/Day/Year	Religion	Baptism Yes/No	1 st Comm. Yes/No	Conf. Yes/No	Marital Status (Married, Single, Widowed, Divorced)	Married by a Catholic Priest? Yes/No	Occupation and/or Place of Employment
Head of Household									
Wife (Please add maiden name)									
List children living with you First Name M.I. Last Name									Grade/School

Please note any special circumstances you want us to know about . . . handicap, shut-in, etc. or any ministries and talents you wish to share.