

HOLY FAMILY PARISH

1D Anzac Road Menai NSW 2234 Australia
Tel: (02) 9543 2677 Email: hfpmenai@gmail.com

CENSUS FORM

PLEASE COMPLETE USING BLOCK LETTERS

People living at the same address who are not related should fill out separate forms.

This information is treated as confidential.

What does being a registered parishioner offer you?

- Facilitates retrieval of Church documents, certificates for school sacramental applications.
- •Simplifies applications for baptism, sacramental programs, weddings, and pastoral care.
- Prompt replies to requests for school references, letters of introduction.

| Tick if you would like the | | |
|----------------------------|--|--|
| priest to bless your home? | | |
| ☐ YES | | |

Section 1 — Household Details

| * Indicates required field | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|------------------|------------------|----------------------------|--|--|
| FAMILY NAME * | | | MAIDEN NAM | IE (if applicable) | | |
| Home Phone Number * | | | Language(s) S | poken (Other than English) | | |
| Residential Address * | | | | | | |
| | Post Code: | | State: | | | |
| Postal Address (if differen | nt from Home Address) | | | | | |
| | Post Code: | | State: | | | |
| I/We usually attend Mass on * | | | | | | |
| Please select one. If you | attend various Masses, please selec | ct the one you a | ttend most ofter | 7. | | |
| Saturday Vigil | Sunday N | <i>lorning</i> | | Sunday Evening | | |
| My/Our Planned Giving status * - How do you prefer supporting the church financially? | | | | | | |
| ☐ Existing Planne | ed Giver/s | ☐ Intereste | ed in becoming | a Planned Giver/s | | |
| Prefer to give v | when attending Mass | | | | | |
| Would you like to volunteer in our parish community? Yes No If Yes, please indicate what ministry you would volunteer for | | | | | | |
| Liturgical, Sacra | amental & Mass | Music & Y | Youth | | | |
| Outreach group | ps | ☐ Work beh | nind the scenes | | | |
| Prayer Groups | | Parish Gr | oups | | | |

Section 2 — Family Member/s Details

All information you provide is optional and **strictly confidential.** Please only include family members living at the address listed.

| Family Member 1 (main contact person)* | | | | | |
|-----------------------------------------------------------------|-----------------------------|--|--|--|--|
| Title: Surname: Christian Name: | | | | | |
| Preferred Name: F | Religion: | | | | |
| Date of Birth: Family Role (husband, wife, grandparent): | | | | | |
| Marital Status: Occupation: | | | | | |
| Name Work Place/School (if applicable): | | | | | |
| Email: | Phone number: | | | | |
| Sacraments: Please tick the sacraments you have received. | | | | | |
| ☐ Baptism ☐ Reconciliation ☐ Eucharist | Confirmation Marriage | | | | |
| Are you involved in any parish Ministries: Yes / No | | | | | |
| Family Member 2 | | | | | |
| Title: Surname: Chris | stian Name: | | | | |
| Preferred Name: F | Religion: | | | | |
| Date of Birth: Family Role (husband, wife, | grandparent): | | | | |
| Marital Status: Occupat | Marital Status: Occupation: | | | | |
| Name Work Place/School (if applicable): | | | | | |
| Email: | Phone number: | | | | |
| Sacraments: Please tick the sacraments you have received. | | | | | |
| ☐ Baptism ☐ Reconciliation ☐ Eucharist | Confirmation Marriage | | | | |
| Are you involved in any parish Ministries: Yes / No | | | | | |
| Other Family Member | | | | | |
| Title: Surname: Chri | Christian Name: | | | | |
| Preferred Name: Religion: | Gender: M / F | | | | |
| Date of Birth: Family Role (husband, wife, child, grandparent): | | | | | |
| Marital Status: Occupation: | | | | | |
| Name Work Place/School (if applicable): | | | | | |
| Email: | Phone number: | | | | |
| Sacraments: Please tick the sacraments you have received. | | | | | |
| ☐ Baptism ☐ Reconciliation ☐ Eucharist | Confirmation Marriage | | | | |
| Are you involved in any parish Ministries: Yes / No | | | | | |

| Other Family Member | | | | | |
|-----------------------------------------------------------------|-------------------------------|--|--|--|--|
| Title: Surname: | name: Christian Name: | | | | |
| Preferred Name: Religi | on: Gender: M / F | | | | |
| Date of Birth: Family Role (husban | d, wife, child, grandparent): | | | | |
| Marital Status: Occupation: | | | | | |
| Name Work Place/School (if applicable): | | | | | |
| Email: | | | | | |
| Sacraments: Please tick the sacraments you have received. | | | | | |
| Baptism Reconciliation Eucha | rist Confirmation Marriage | | | | |
| Are you involved in any parish Ministries: Yes / No | | | | | |
| Other Family Member | | | | | |
| Title: Surname: | Christian Name: | | | | |
| Preferred Name: Religi | on: Gender: M / F | | | | |
| Date of Birth: Family Role (husband, wife, child, grandparent): | | | | | |
| Marital Status: Occupation: | | | | | |
| Name Work Place/School (if applicable): | | | | | |
| Email: | Phone number: | | | | |
| Sacraments: Please tick the sacraments you have received. | | | | | |
| Baptism Reconciliation Eucha | rist Confirmation Marriage | | | | |
| Are you involved in any parish Ministries: Yes / No | | | | | |
| Other Family Member | | | | | |
| Title: Surname: | Christian Name: | | | | |
| Preferred Name: Religi | | | | | |
| Date of Birth: Family Role (husban | | | | | |
| | s: Occupation: | | | | |
| Name Work Place/School (if applicable): | | | | | |
| Email: | | | | | |
| Sacraments: Please tick the sacraments you have received. | | | | | |
| Baptism Reconciliation Eucha | rist Confirmation Marriage | | | | |
| Are you involved in any parish Ministries: Yes / No | | | | | |

Important Note regarding your Parish Records:

As changes occur in your family that effect the information, please tell us so that we may keep your records complete.

This information is used for on-going pastoral care and sacramental records.

Collection Notice of Privacy:

The information requested by the Catholic Parish of Holy Family Menai in this census form (**census information**) will be held in accordance with Holy Family Parish's Privacy Policy and the Australian Privacy Principles under the Privacy Act 1988.

Census information is treated in confidence and will be used only to help with personal and pastoral care and the appropriate administration of the parish and Archdiocese. We comply with the Data Protection Act and no information will be passed onto third parties without prior permission. For more information, please contact the Parish Office (02) 9543 2677