

OUR LADY OF THE ALLEGHENIES ROMAN CATHOLIC PARISH  
608 MAIN STREET – LILLY, PA 15938 ... PARISH CENSUS REGISTRATION FORM

PLEASE PRINT LEGIBLY TODAY'S DATE: \_\_\_\_\_ YOUR ENVELOPE # \_\_\_\_\_

FAMILY LAST NAME \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ UNLISTED? \_\_\_\_\_

MALE HEAD OF HOUSEHOLD – IF THERE IS NONE, LEAVE BLANK. IF HE IS DECEASED CHECK HERE: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

RELIGION: ROMAN CATHOLIC \_\_\_\_\_ OR OTHER (PLEASE SPECIFY): \_\_\_\_\_

BAPTISM: YES OR NO: \_\_\_\_\_ DATE: \_\_\_\_\_

CHURCH/CITY/STATE: \_\_\_\_\_

1<sup>ST</sup> HOLY COMMUNION: YES OR NO: \_\_\_\_\_ DATE: \_\_\_\_\_

CHURCH/CITY/STATE: \_\_\_\_\_

CONFIRMATION: YES OR NO: \_\_\_\_\_ DATE: \_\_\_\_\_

CHURCH/CITY/STATE: \_\_\_\_\_

MARITAL STATUS: SINGLE \_\_\_\_\_; DIVORCED \_\_\_\_\_; ANNULLED \_\_\_\_\_; WIDOWED \_\_\_\_\_; SEPARATED \_\_\_\_\_

CURRENTLY MARRIED: YES OR NO: \_\_\_\_\_ DATE OF MARRIAGE: \_\_\_\_\_

CHURCH/CITY/STATE: \_\_\_\_\_

*\*IF NOT MARRIED IN A ROMAN CATHOLIC CHURCH THEN: WHERE? \_\_\_\_\_*

*BY WHAT KIND OF OFFICIANT? \_\_\_\_\_*

*WAS YOUR MARRIAGE LATER BLESSED BY THE CHURCH? YES OR NO? \_\_\_\_\_*

*IF YES WHERE & BY WHOM? \_\_\_\_\_*

FEMALE HEAD OF HOUSEHOLD – IF THERE IS NONE, LEAVE BLANK. IF SHE IS DECEASED CHECK HERE: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

RELIGION: ROMAN CATHOLIC \_\_\_\_\_ OR OTHER (PLEASE SPECIFY): \_\_\_\_\_

BAPTISM: YES OR NO: \_\_\_\_\_ DATE: \_\_\_\_\_

CHURCH/CITY/STATE: \_\_\_\_\_

1<sup>ST</sup> HOLY COMMUNION: YES OR NO: \_\_\_\_\_ DATE: \_\_\_\_\_

CHURCH/CITY/STATE: \_\_\_\_\_

CONFIRMATION: YES OR NO: \_\_\_\_\_ DATE: \_\_\_\_\_

CHURCH/CITY/STATE: \_\_\_\_\_

MARITAL STATUS: SINGLE \_\_\_\_\_; DIVORCED \_\_\_\_\_; ANNULLED \_\_\_\_\_; WIDOWED \_\_\_\_\_; SEPARATED \_\_\_\_\_

CURRENTLY MARRIED: YES OR NO: \_\_\_\_\_ DATE OF MARRIAGE: \_\_\_\_\_

CHURCH/CITY/STATE: \_\_\_\_\_

*\*IF NOT MARRIED IN A ROMAN CATHOLIC CHURCH THEN: WHERE? \_\_\_\_\_*

*WHERE? \_\_\_\_\_*

*BY WHAT KIND OF OFFICIANT? \_\_\_\_\_*

*WAS YOUR MARRIAGE LATER BLESSED BY THE CHURCH? YES OR NO? \_\_\_\_\_*

*IF YES WHERE & BY WHOM? \_\_\_\_\_*

**CHILDREN LIVING AT THIS ADDRESS WHO ARE CURRENTLY IN HIGH SCHOOL OR YOUNGER**

**(NOTE: CHILDREN WHO ARE 18 OR OLDER AND OUT OF HIGH SCHOOL WILL FILL OUT THEIR OWN FORMS)**

NAME (FIRST, MIDDLE, LAST)	DATE/CITY/STATE OF BIRTH	BAPTISM CHURCH/CITY AND DATE	FIRST HOLY COMMUNION CHURCH/CITY AND DATE	CONFIRMATION CHURCH/CITY AND DATE	PRESENT SCHOOL ATTENDED AND GRADE LEVEL

IS THERE ANYONE IN THIS HOUSEHOLD WHO IS HOMEBOUND OR CONFINED IN A NURSING HOME? \_\_\_\_\_  
WHO? \_\_\_\_\_ IF HOMEBOUND, DO THEY WANT 1<sup>ST</sup> FRIDAY COMMUNION? \_\_\_\_\_

DO YOU HAVE A CEMETERY PLOT? \_\_\_\_\_ UNDER WHAT NAME? \_\_\_\_\_  
IN ST. BRIGID CEMETERY? \_\_\_\_ IN MT. CARMEL CEMETERY? \_\_\_\_ IN OUR LADY OF THE ALLEGHENIES? \_\_\_\_  
# OF SPACES? \_\_\_\_\_ DO YOU WISH TO OBTAIN INFORMATION ABOUT THE CEMETERY? \_\_\_\_\_

ARE YOU INTERESTED IN ANY OF THE FOLLOWING?

- \_\_\_\_ ALTAR SERVER  
\_\_\_\_ READER  
\_\_\_\_ EXTRA-ORDINARY MINISTER OF HOLY COMMUNION  
\_\_\_\_ MUSIC MINISTRY  
\_\_\_\_ USHER  
\_\_\_\_ CCD TEACHER OR VOLUNTEER (MUST HAVE APPROPRIATE CLEARANCES)  
\_\_\_\_ FUNDRAISING COMMITTEE OR VOLUNTEERING  
\_\_\_\_ FESTIVAL COMMITTEE OR VOLUNTEERING  
\_\_\_\_ KNIGHTS OF COLUMBUS (MEN 18+)  
\_\_\_\_ ST. VINCENT DE PAUL SOCIETY  
\_\_\_\_ VOLUNTEER TO HELP WITH MAINTENANCE  
\_\_\_\_ YOUTH MINISTRY (MUST HAVE APPROPRIATE CLEARANCES)