


OUR LADY HELP OF CHRISTIANS ROMAN CATHOLIC CHURCH – 2021 CENSUS
MUST BE FILLED OUT TO MAINTAIN ACTIVE STATUS. PLEASE TURN IN ENVELOPES.



| | | | |
|--|---|---|-----------------------------|
| Head of Household Last Name: _____ | | Mass(es) Attending: ___ 9AM ___ 11AM _____ WEEKDAYS _____ HOLY DAYS | |
| Apt: # _____ Street Address: _____ | | Catholic Marriage: Yes / No | Marriage Date: _____ |
| City and State: _____ Zip: _____ | | Church or Place of Marriage: _____ | |
| HER Phone No. _____ HIS Phone No.: _____ | | If Spouse is different Religion, please state: _____ | |
| Email Address (IMPORTANT): _____ |  Do you want to do Online Giving? Yes / No | Do you Receive Envelopes? Yes / No | Env. No. _____ |

MEMBERSHIP INFORMATION (ADULTS OVER AGE 21 SHOULD FILL OUT THEIR OWN FORM & TURN IN ENVELOPES)

| CENSUS INSTRUCTIONS: | QUESTION | HEAD 1 | HEAD 2 | CHILD/OTHER | CHILD/OTHER | CHILD/OTHER | CHILD/OTHER |
|---|--|--------|--------|-------------|-------------|-------------|---|
| Please follow these few guidelines to ensure accurate handling of this Census form: | First Name & Middle Initial | | | | | | |
| ♥ Please Print Clearly. | Nickname | | | | | | |
| ♥ Place an X if no answer. | Maiden Name | | | | | | |
| ♥ If you have questions, call the Rectory 610-432-9384. | Marital Status (M—Si—D—Sep—W) | | | | | | |
| ♥ All information is kept confidential and secure. | Primary Language Spoken | | | | | | |
| ♥ Return to the Rectory or drop in collection basket. | Date of Birth | | | | | | |
| | Occupation | | | | | | |
| If you don't know your sacrament dates, you can just answer Y/N and/or Church name. | Name of Workplace or School Attending (if child) | | | | | | |
| | Baptism Date and Church | | | | | | |
| | 1st Communion Date and Church | | | | | | |
| | Confirmation Date and Church | | | | | | |
| Thank you for filling this out for us! Stay safe and healthy in 2021! | Homebound (Y/N)* | | | | | | *If Homebound, please note if you want Communion. |

| | |
|-------------------------|--|
| Office Use Only: | |
|-------------------------|--|

TURN → **TURN →** **TURN →**

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**OUR LADY HELP OF
CHRISTIANS ROMAN
CATHOLIC CHURCH**



**1927 – 2021
Our 94th Year**

| | HEAD 1 | HEAD 2 | CHILD/OTHER | CHILD/OTHER | CHILD/OTHER | CHILD/OTHER |
|---|--------|--------|-------------|-------------|-------------|-------------|
| Ministries I Currently Belong To | | | | | | |
| Ministries I Would Like to Belong to | | | | | | |
| Would You Like to be an Usher or Lector (Please note which one) | | | | | | |
| Special Skills (Including Maintenance/Repairs) | | | | | | |
| Special Needs (Y/N) and Specify | | | | | | |
| English-to-Spanish Translation (Y/N) | | | | | | |
| What is your hope for life in the future at OLHC: | | | | | | |

A Parishioner is one who belongs to the Parish Family. As such, he/she is formally registered with us and is actively committed to the Parish through participation in the life of the Parish Community – spiritually, socially and financially. Please note – we will not be able to issue *Sponsor Certificates* or *Letters of Eligibility* for Baptism or Confirmation if you are not a registered member of the Parish (“Active” means attending for at least three months). **Please read: In order to qualify as an Active Parishioner, you must use your Sunday envelopes.**

Dear Parishioners of OLHC,

Thank you for filling out our **2021 Census**. With the implementation of our *Parishsoft* software, our goal is to build on this database with information that will enable us to better understand the makeup of our parish, identify and better serve your needs, and discover the talents and skills we have within the parish. **All information remains confidential.**

SIGNATURE:

DATE:

MINISTRIES AND ORGANIZATIONS (PLEASE CIRCLE IF YOU ARE INTERESTED)

| | | |
|---|---|-----------------|
| Children’s Faith Formation (CCD or Youth Group) | Fundraising Committee | Maintenance |
| Choir | Grounds | Music Ministry |
| Christmas Team | Lector | Usher/Collector |
| Clean Team (After Mass) | WE REALLY NEED VOLUNTEERS! PLEASE HELP IF YOU CAN! | |
| Easter Team | | |
| Finance Council | | |

Please complete the entire form so that we have an accurate snapshot of each family and individuals that live within your household.

Thank you for participating. Remember that every person is important, and every person has a place in the mission of Jesus.