

(PLEASE DO NOT WRITE IN THIS BOX) ENVELOPE # _____ FILE UPDATED: _____ PARISH AREA: _____

HOUSEHOLD MAILING ADDRESS

Check Box for Mailing Address of Household:

Mr. & Mrs. Mr. Mrs. Miss Ms. Dr. _____

FIRST NAME _____ M.I. _____ LAST NAME _____
 NUMBER _____ STREET _____ APT./FLOOR _____
 CITY _____ STATE _____ ZIP _____

IF MAILINGS ARE TO BE SENT TO THE HUSBAND AND WIFE, PLEASE INDICATE "MR. & MRS." AND THE HUSBAND'S FIRST NAME.

ALL INFORMATION WILL REMAIN CONFIDENTIAL * * * PLEASE PRINT

FAMILY LAST NAME (HOUSEHOLD)	HOME PHONE # ()	LISTED? <input type="checkbox"/> YES <input type="checkbox"/> NO
	WORK PHONE # ()	

ADDRESS HOUSE # _____	STREET _____	APT./FLOOR # _____	CITY _____	STATE _____	ZIP _____
--------------------------	--------------	--------------------	------------	-------------	-----------

PLEASE ENTER THE INFORMATION REQUESTED FOR THOSE LIVING IN THIS HOUSEHOLD

FOR ALL ADULTS LIVING IN THE HOUSE: In *Marital Status* column, please use the following numbers to indicate Marital Status:

0 - Single (never married) 1 - Valid Catholic Marriage 2 - Married by Minister or Rabbi 3 - Civil Marriage 4 - Widowed 5 - Separated 6 - Divorced

FIRST NAMES <i>(include wife's maiden name)</i>	RELATIONSHIP TO HEAD OF HOUSE	DATE OF BIRTH mm/dd/yyyy	SEX M or F	RELIGION	BAPT? Y or N	1st COMM? Y or N	CONFIRM? Y or N	MARITAL STATUS	SCHOOL or OCCUPATION
1.	HEAD OF HOUSE	___/___/___							
2.	SPOUSE	___/___/___							

CHILDREN List children from oldest to youngest - (include last names, if other than above)

3.		___/___/___							
4.		___/___/___							
5.		___/___/___							
6.		___/___/___							
7.		___/___/___							

OTHERS LIVING IN THIS HOUSEHOLD

(first and last names)

8.		___/___/___							
9.		___/___/___							
10.		___/___/___							

Please check where appropriate to help us better serve you here at St. Columba

There is someone in my Home. . .

- ___ . . . who is disabled.
- ___ . . . who is unable to come to Mass and wishes to receive Communion.
- ___ . . . who would like to inquire about becoming a Catholic.
- ___ . . . who would like information about Religious Education for a family member.
- ___ . . . who is an adult interested in receiving First Communion and/or Confirmation.
- ___ . . . who is interested in information about marriage annulment.
- ___ . . . who is interested in having present marriage recognized in the Catholic Church.
- ___ . . . who would like to be contacted by phone by a priest.

Best time to call: _____ Phone number: _____