

## Holy Guardian Angels Parish Census Information

Family Name: \_\_\_\_\_ Family Primary Phone: \_\_\_\_\_  
 Family Primary Email: \_\_\_\_\_  
 Mr. (Preferred Phone): \_\_\_\_\_ Mrs. (Preferred Phone): \_\_\_\_\_  
 Additional Phone Numbers:  
 Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Additional Emails: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Is your mailing address different than the address listed above? If yes, please provide mailing address below:  
 \_\_\_\_\_

HGA Uses Parish Cast to notify parishioners of important updates which may include alerts, upcoming events, last-minute scheduling changes, and emergencies. Please indicate if the above information may be added to the Parish Cast list.

- Yes, please add my information (phone no. and email) to Parish Cast  
 No, do not add my information (phone no. and email) to Parish Cast

### Household Information

Head of Household _____ First Name _____ Maiden Name _____ (if applicable) Date of Birth _____ Religion _____	Spouse _____ First Name _____ Maiden Name _____ (if applicable) Date of Birth _____ Religion _____
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*Please circle Yes or No*

*Please circle Yes or No*

Are you Baptized?      Yes      No  
 Church of Baptism \_\_\_\_\_

Are you Baptized?      Yes      No  
 Church of Baptism \_\_\_\_\_

First Communion      Yes      No  
 Confirmed      Yes      No  
 Do you attend Sunday Mass  
 weekly?      Yes      No  
 Easter Duty?\*      Yes      No

First Communion      Yes      No  
 Confirmed      Yes      No  
 Do you attend Sunday Mass  
 weekly?      Yes      No  
 Easter Duty?\*      Yes      No

\*Easter Duty: Catholics who have received their First Holy Communion are bound to receive Holy Communion at least once a year. This duty is to be fulfilled during the Easter Season.

Occupation \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Employer \_\_\_\_\_

\_\_\_ Full-time \_\_\_ Part-time \_\_\_ Retired \_\_\_ Unemployed

\_\_\_ Full-time \_\_\_ Part-time \_\_\_ Retired \_\_\_ Unemployed

Marital Status    \_\_\_ Single    \_\_\_ Married    \_\_\_ Widowed    \_\_\_ Separated    \_\_\_ Divorced    \_\_\_ Living Together

If married, place and date of marriage: \_\_\_\_\_

Were you married by a Catholic Priest?    \_\_\_ Yes    \_\_\_ No

If no, did you have permission from a Catholic Bishop?    \_\_\_ Yes    \_\_\_ No



*Please continue on the other side.*

## Other Members of the Household

Name	D/O/B	Religion*	Baptized Y/N	Church of Baptism	1 <sup>st</sup> Communion Y/N	Confirmed Y/N	Weekly Mass Y/N	Easter Duty Y/N	Name of School or Place of Work	Present Grade Level	Relation to Head of Household
<b>Children:</b>											
<b>Others:</b>											

*\*Note: Registering as a member in a Catholic Church does not automatically make you or your children Catholic.*



—Guardian Society—  
HOLY GUARDIAN ANGELS PARISH

Have you included a gift to Holy Guardian Angels through your will or another planned gift to provide lasting support for God's work?

YES       NO

Holy Guardian Angels has many ministries, organizations, events, and activities to get involved in – as much or as little as you would like. We have 5 areas of mission here at HGA – please indicate an area (or several) that you have an interest in. Someone will contact you shortly after we receive your returned Census Form to talk about your specific gifts, passions, and talents!

Mission for Evangelization	Mission for Education	Mission for Pastoral Ministry	Mission for Liturgy	Mission for Social Concerns & Outreach
<input type="checkbox"/> RCIA	<input type="checkbox"/> PREP	<input type="checkbox"/> Legion of Mary	<input type="checkbox"/> Choir	<input type="checkbox"/> Pen 2 Paper Card Ministry
<input type="checkbox"/> Heavenbound Ministry	<input type="checkbox"/> RCIA	<input type="checkbox"/> Knights of Columbus	<input type="checkbox"/> Cantors	<input type="checkbox"/> St. Vincent de Paul Society
	<input type="checkbox"/> VBS	<input type="checkbox"/> Rosary Rally	<input type="checkbox"/> Altar Society	<input type="checkbox"/> Culture of Life Group
		<input type="checkbox"/> Parish Nurses	<input type="checkbox"/> Altar Servers	
		<input type="checkbox"/> Holy Name Society	<input type="checkbox"/> Lectors	
		<input type="checkbox"/> Prayer Shawl Ministry	<input type="checkbox"/> Eucharistic Ministers	
		<input type="checkbox"/> Vocations Committee	<input type="checkbox"/> Children's Liturgy of the Word	
		<input type="checkbox"/> HGA Seniors	<input type="checkbox"/> Ushers	
		<input type="checkbox"/> Young Adult Ministry		
		<input type="checkbox"/> Youth Ministry		
		<input type="checkbox"/> Boy Scouts		
		<input type="checkbox"/> Girl Scouts		
		<input type="checkbox"/> CYO		
		<input type="checkbox"/> Bereavement Ministry		

Please check this box if you are interested in volunteering for the Parish. Someone will get in touch with you to discuss volunteer opportunities.