

# St. John the Evangelist Catholic Church Census Form

57805 Main Street, Plaquemine, LA 70764  
 (225) 687-2402  
 Fax (225) 687-1587

**Family Information:**

**Last Name:** \_\_\_\_\_  
 Title: \_\_\_\_\_ Mr. and Mrs. \_\_\_\_\_ Mr. \_\_\_\_\_ Mrs. \_\_\_\_\_ Ms. \_\_\_\_\_ Miss \_\_\_\_\_ Dr. \_\_\_\_\_ Other \_\_\_\_\_  
 Suffix: \_\_\_\_\_ Jr. \_\_\_\_\_ Sr. \_\_\_\_\_ III \_\_\_\_\_ Other \_\_\_\_\_  
 Address: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: (\_\_\_\_) \_\_\_\_\_ Unlisted? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_  
**St. John School Registered:** \_\_\_\_\_ Yes \_\_\_\_\_ No **Do you wish to receive church envelopes?** \_\_\_\_\_ Yes \_\_\_\_\_ No

**Adult Member Information:**

Member Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Maiden Name: \_\_\_\_\_  
 Member Type: \_\_\_\_\_ Head \_\_\_\_\_ Spouse \_\_\_\_\_ Adult \_\_\_\_\_ Young Adult \_\_\_\_\_ Child \_\_\_\_\_ Other \_\_\_\_\_  
 Marital Status: \_\_\_\_\_ Married \_\_\_\_\_ Single \_\_\_\_\_ Separated \_\_\_\_\_ Single Parent \_\_\_\_\_ Divorced \_\_\_\_\_ Widow(er) \_\_\_\_\_  
*(Married by a Priest)* \_\_\_\_\_ Yes \_\_\_\_\_ No  
 Religion: \_\_\_\_\_ Catholic \_\_\_\_\_ Other \_\_\_\_\_ Convert \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Education *(Grade/Degree)* \_\_\_\_\_  
 Gender: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Disability: \_\_\_\_\_  
 Occupation: \_\_\_\_\_ Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
**Sacraments Received:** \_\_\_\_\_ Date: \_\_\_\_\_ **Church Name and Address (if known):** \_\_\_\_\_  
 Baptism \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_/\_\_\_\_/\_\_\_\_  
 Confirmation \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_/\_\_\_\_/\_\_\_\_  
 Marriage \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_/\_\_\_\_/\_\_\_\_  
 1st Communion \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_/\_\_\_\_/\_\_\_\_  
 1st Reconciliation \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_/\_\_\_\_/\_\_\_\_

**Adult Member Information:**

Member Name: \_\_\_\_\_ Nickname: \_\_\_\_\_ Maiden Name: \_\_\_\_\_  
 Member Type: \_\_\_\_\_ Head \_\_\_\_\_ Spouse \_\_\_\_\_ Adult \_\_\_\_\_ Young Adult \_\_\_\_\_ Child \_\_\_\_\_ Other \_\_\_\_\_  
 Marital Status: \_\_\_\_\_ Married \_\_\_\_\_ Single \_\_\_\_\_ Separated \_\_\_\_\_ Single Parent \_\_\_\_\_ Divorced \_\_\_\_\_ Widow(er) \_\_\_\_\_  
*(Married by a Priest)* \_\_\_\_\_ Yes \_\_\_\_\_ No  
 Religion: \_\_\_\_\_ Catholic \_\_\_\_\_ Other \_\_\_\_\_ Convert \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Education *(Grade/Degree)* \_\_\_\_\_  
 Gender: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Handicap: \_\_\_\_\_  
 Occupation: \_\_\_\_\_ Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
**Sacraments Received:** \_\_\_\_\_ Date: \_\_\_\_\_ **Church Name and Address (if known):** \_\_\_\_\_  
 Baptism \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_/\_\_\_\_/\_\_\_\_  
 Confirmation \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_/\_\_\_\_/\_\_\_\_  
 Marriage \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_/\_\_\_\_/\_\_\_\_  
 1st Communion \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_/\_\_\_\_/\_\_\_\_  
 1st Reconciliation \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_/\_\_\_\_/\_\_\_\_

**Other Members In Your Household (children):**

Member Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
 Member Type: (check one)  Adult  Young Adult  Child  Other: \_\_\_\_\_  
 Religion: (check one)  Catholic  Convert  School: \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Gender:  Male  Female  Grade: \_\_\_\_\_ Handicap: \_\_\_\_\_  
 In St. John CCD?  Yes  No  
**Sacraments Received:** \_\_\_\_\_  
 Baptism  Yes  No \_\_\_\_\_  
 Confirmation  Yes  No \_\_\_\_\_  
 Marriage  Yes  No \_\_\_\_\_  
 1st Communion  Yes  No \_\_\_\_\_  
 1st Reconciliation  Yes  No \_\_\_\_\_  
**Date:** \_\_\_\_\_  
**Church Name and Address (if known):**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Member Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
 Member Type: (check one)  Adult  Young Adult  Child  Other: \_\_\_\_\_  
 Religion: (check one)  Catholic  Convert  School: \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Gender:  Male  Female  Grade: \_\_\_\_\_ Handicap: \_\_\_\_\_  
 In St. John CCD?  Yes  No  
**Sacraments Received:** \_\_\_\_\_  
 Baptism  Yes  No \_\_\_\_\_  
 Confirmation  Yes  No \_\_\_\_\_  
 Marriage  Yes  No \_\_\_\_\_  
 1st Communion  Yes  No \_\_\_\_\_  
 1st Reconciliation  Yes  No \_\_\_\_\_  
**Date:** \_\_\_\_\_  
**Church Name and Address (if known):**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Member Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
 Member Type: (check one)  Adult  Young Adult  Child  Other: \_\_\_\_\_  
 Religion: (check one)  Catholic  Convert  School: \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Gender:  Male  Female  Grade: \_\_\_\_\_ Handicap: \_\_\_\_\_  
 In St. John CCD?  Yes  No  
**Sacraments Received:** \_\_\_\_\_  
 Baptism  Yes  No \_\_\_\_\_  
 Confirmation  Yes  No \_\_\_\_\_  
 Marriage  Yes  No \_\_\_\_\_  
 1st Communion  Yes  No \_\_\_\_\_  
 1st Reconciliation  Yes  No \_\_\_\_\_  
**Date:** \_\_\_\_\_  
**Church Name and Address (if known):**  
 \_\_\_\_\_  
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 \_\_\_\_\_