

St Felix de Valois Parish Census Form

550 Chapel Rd Bankstown NSW 2200 Ph: 9790 1933 e-mail: admin@stfelixparish.org.au

Surname:					Telephone:				silent? Yes/no		
Address:					Mobile No:						
Post Code:				E-Mail Address:							
Language(s) oth	ner than Engli	sh									
PEOPLE LIVING AT Christian Name	T THIS ADDRES Date Of Birth	Relation of others to you	Gender M/F	Religion	Sacraments received Bapt. Euch. Conf.		Country of Birth	Occupation or School and Year			
		Self				'					
Is there any way th	ne parish can he	elp you?									
Do you use Planne	ed Giving? Yes	/ No. If so, yo	ur number								
If No, would you like	ke to start Envel	lopes or Credit	Card Ded	uctions? Y	es / N	٥.					

This page will take a little longer to fill out, but it would be extremely helpful if you did. Please tick which ever boxes apply to your family. If a parish group relates to more than one member of your family, tick as appropriate and put both names in the 'Person' column. As an example, the first two rows are filled in, they tell us that Bernard is currently an acolyte and that Trish is interested in the Altar Society, but would like to know more.

Parish Groups and Ministries	Am already involved	Would like to be involved	Would like to know more	Name of Person
EXAMPLE Acolyte	v			Bernard
EXAMPLE Altar Society		v	v	Trish
Acolyte				
Reader & Commentator				
Extraordinary Ministers of the Eucharist				
Liturgy Committee				
Altar Society				
Musicians & Choir				
Social Activities (Morning Teas)				
Friendship Group				
Children's Sacramental Program				
Children's Liturgy (Sunday 10am Mass)				
RCIA, Rite of Christian Initiation of Adults				
Parish Council				
Catechist				
St Vincent de Paul Society				
Visitation of the sick & elderly				
Adult Religious Education				
Altar Server				
Youth Group				
Church Warden				
Cemetery Committee				
Fete				

Thank you so much for taking the time to complete this census. Please return completed form to the Parish Office.