

**ST JAMES THE APOSTLE CATHOLIC PARISH, HOPPERS CROSSING NORTH - CENSUS CARD**

Family Name \_\_\_\_\_

Address \_\_\_\_\_ Post Code \_\_\_\_\_

Person 1

Name: Mr / Mrs / Miss \_\_\_\_\_ Birth Date \_\_\_ / \_\_\_ / \_\_\_

Religion \_\_\_\_\_ Occupation \_\_\_\_\_

Email Address \_\_\_\_\_ Mobile \_\_\_\_\_ Contact Number \_\_\_\_\_

Person 2

Name: Mr / Mrs / Miss \_\_\_\_\_ Birth Date \_\_\_ / \_\_\_ / \_\_\_

Religion \_\_\_\_\_ Occupation \_\_\_\_\_

Email Address \_\_\_\_\_ Mobile \_\_\_\_\_ Contact Number \_\_\_\_\_

Where do you usually attend Mass? \_\_\_\_\_ Suburb \_\_\_\_\_

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Children at Home

1. Name \_\_\_\_\_ Religion \_\_\_\_\_

Birth Date \_\_\_ / \_\_\_ / \_\_\_ Male  Female  School Name \_\_\_\_\_

2. Name \_\_\_\_\_ Religion \_\_\_\_\_

Birth Date \_\_\_ / \_\_\_ / \_\_\_ Male  Female  School Name \_\_\_\_\_

3. Name \_\_\_\_\_ Religion \_\_\_\_\_

Birth Date \_\_\_ / \_\_\_ / \_\_\_ Male  Female  School Name \_\_\_\_\_

4. Name \_\_\_\_\_ Religion \_\_\_\_\_

Birth Date \_\_\_ / \_\_\_ / \_\_\_ Male  Female  School Name \_\_\_\_\_

Comments

**Privacy Statement:** This Parish is committed to upholding maintaining the Privacy Principles and Legislative requirements as set out in the Statutory Regulations of the Australian and Victorian Governments. This relates particularly to the gathering, recording, storing and disclosure of information relating to Church operations and to the provision of religious and pastoral care services. We will not disclose your personal information to other third parties for other fundraising purposes without your consent.

