



CATHOLIC PARISH OF OUR LADY OF THE ROSARY CALOUNDRA



Embracing the Communities of: Beerwah,
Bokarina, Caloundra, Currimundi, Golden Beach, Kawana,
Kenilworth, Landsborough, Little Mountain, Maleny & Mooloolah.

PARISH CENSUS FORM

OFFICE USE ONLY

COMMUNITY:		SURNAME:		No change <input type="checkbox"/>	Change <input type="checkbox"/>	New <input type="checkbox"/>
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Parish Website: www.caloundracatholic.net.au

PO Box 595, Caloundra 4551 Ph: (07) 5491 2011 (24/7)
Fax: (07) 5491 2863 E-mail: calndra@bne.catholic.net.au

Office Hours: 8.20am-3.20pm Monday-Friday

MINISTRIES & ROLES

Name:

Name:

FAITH EDUCATION / FORMATION	<i>Already Involved</i>	<i>Wish to be involved</i>	<i>Already Involved</i>	<i>Wish to be involved</i>
Rite of Christian Initiation of Adults				
Baptism preparation for parents				
Sacramental Preparation for children				
Adult Education				

LITURGY	<i>Already Involved</i>	<i>Wish to be involved</i>	<i>Already Involved</i>	<i>Wish to be involved</i>
Liturgy Committee				
Greeting & Hospitality				
Reader				
Leader				
Sacristan				
Plate Collectors (<i>Collections</i>)				
Children's Liturgy of the Word				
Extraordinary Minister of Holy Communion				
Organist/Singer/Choir				

PASTORAL LIFE OF THE PARISH	<i>Already Involved</i>	<i>Wish to be involved</i>	<i>Already Involved</i>	<i>Wish to be involved</i>
Finance Council				
Parish Office Volunteer				
Communion to the sick & housebound parishioners				
Pastoral Care				
St Vincent de Paul Society				
Youth Ministry				
Playgroup				
Hospitality for Funerals				

CARE OF CHURCH AND PARISH PLANT	<i>Already Involved</i>	<i>Wish to be involved</i>	<i>Already Involved</i>	<i>Wish to be involved</i>
Cleaning (including churches & Parish facilities)				
Maintenance				
Laundering of church linen				

Please list any other skills or interests that you think can be added to our ministries.

A member of our family is unable to attend Mass and would like to receive Communion at home	
A member of our family would like information about becoming a Catholic	

Thankyou for taking time to complete this form!

FAMILY DETAILS

Surname:	
How would you like mail addressed:	
Residential Address:	
Postal Address: <i>(if different to residential)</i>	
Community where you attend Mass:	
<i>(Beerwah, Bokarina, Caloundra Saturday 6.00pm, Caloundra Sunday 6.30am, Caloundra Sunday 9.30am, Currimundi, Golden Beach, Kawana, Kenilworth, Landsborough, Little Mountain, Maleny, Mooloolah)</i>	
Are you in Planned Giving? <i>(please tick)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> Planned Giving No <i>(if known)</i> :
Method: <i>(please tick)</i>	Envelopes <input type="checkbox"/> Direct Debit <input type="checkbox"/> Credit Card <input type="checkbox"/>
Phone Number:	
Email Address:	
Do you wish to be updated on Parish News via email? Yes <input type="checkbox"/> No <input type="checkbox"/>	

HEADS OF HOUSEHOLD

ADULT 1		ADULT 2	
Surname:		Surname:	
Christian Names:		Christian Names:	
Title: <i>(Mr/Mrs/Ms Miss/Other)</i>		Title: <i>(Mr/Mrs/Ms Miss/Other)</i>	
Preferred Name:		Preferred Name:	
Date of Birth:		Date of Birth:	
Country of Birth: <i>(other than Australia)</i>		Country of Birth: <i>(other than Australia)</i>	
Marital Status:		Marital Status:	
Religion:		Religion:	
Mobile Number:		Mobile Number:	
Preferred Email:		Preferred Email:	
Occupation:		Occupation:	
Job Title:		Job Title:	
Work Phone: <i>(if contactable at work)</i>		Work Phone: <i>(if contactable at work)</i>	
Employer:		Employer:	
Sacraments Received: <i>(please tick)</i>		Sacraments Received: <i>(please tick)</i>	
Baptism	<input type="checkbox"/>	Baptism	<input type="checkbox"/>
1st Communion	<input type="checkbox"/>	1st Communion	<input type="checkbox"/>
Confirmation	<input type="checkbox"/>	Confirmation	<input type="checkbox"/>
Marriage	<input type="checkbox"/>	Marriage	<input type="checkbox"/>

OTHER HOUSEHOLD MEMBERS

*If you need additional spaces, please use a separate piece of paper, and attach to your family's form.
Children 18 or older are encouraged to register on their own form as an individual parish member.*

MEMBER 1		MEMBER 2	
Surname:		Surname:	
Christian Names:		Christian Names:	
Gender:		Gender:	
Preferred Name:		Preferred Name:	
Date of Birth:		Date of Birth:	
School:		School:	
Year Level:		Year Level:	
Sacraments Received: <i>(please tick)</i>		Sacraments Received: <i>(please tick)</i>	
Baptism	<input type="checkbox"/>	Baptism	<input type="checkbox"/>
1st Communion	<input type="checkbox"/>	1st Communion	<input type="checkbox"/>
MEMBER 3		MEMBER 4	
Surname:		Surname:	
Christian Names:		Christian Names:	
Gender:		Gender:	
Preferred Name:		Preferred Name:	
Date of Birth:		Date of Birth:	
School:		School:	
Year Level:		Year Level:	
Sacraments Received: <i>(please tick)</i>		Sacraments Received: <i>(please tick)</i>	
Baptism	<input type="checkbox"/>	Baptism	<input type="checkbox"/>
1st Communion	<input type="checkbox"/>	1st Communion	<input type="checkbox"/>
MEMBER 5		MEMBER 6	
Surname:		Surname:	
Christian Names:		Christian Names:	
Gender:		Gender:	
Preferred Name:		Preferred Name:	
Date of Birth:		Date of Birth:	
School:		School:	
Year Level:		Year Level:	
Sacraments Received: <i>(please tick)</i>		Sacraments Received: <i>(please tick)</i>	
Baptism	<input type="checkbox"/>	Baptism	<input type="checkbox"/>
1st Communion	<input type="checkbox"/>	1st Communion	<input type="checkbox"/>
Confirmation	<input type="checkbox"/>	Confirmation	<input type="checkbox"/>