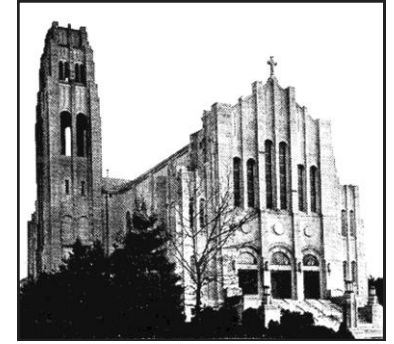


Saint Justin-Saint Michael Parish
 230 Blue Hills Avenue
 Hartford, CT 06112



FAMILY LAST NAME: _____ DATE: _____

ADDRESS: _____ TOWN: _____ ZIP CODE: _____

HOME PHONE: _____ CELL PHONE: _____

LANGUAGE SPOKEN OTHER THAN ENGLISH: _____

**ALL CENSUS
 INFORMATION
 IS
 CONFIDENTIAL**

WOULD YOU LIKE TO RECEIVE STWARDSHIP ENVELOPES? YES NO

FIRST NAME, MIDDLE NAME (Last name only if different than Family Name)	MALE/ FEMALE	SELF, SPOUSE, SON, DAUGHTER	DATE OF BIRTH	RELIGION	OCCUPATION (IF APPLICABLE)	MARRIED BY PRIEST/ DEACON YES/NO	DATE MARRIED	BAPTISM YES/NO	COMMUNION YES/NO	CONFIRMATION YES/NO
1)										
2)										
3)										
4)										
5)										
6)										
7)										

HOW TO RETURN YOU COMPLETED FORM:

- 1) Complete the form online and send as an attachment to the rectory office stjustinstmichael@gmail.com
- 2) Print form and mail to office: St. Justin Church, 230 Blue Hills Avenue, Hartford, CT 06112
- 3) Print and place in the Sunday Offertory Basket