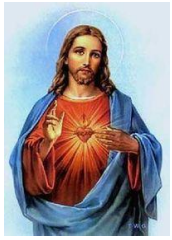

CHURCH OF THE SACRED HEART OF JESUS
152 JALAN PEEL, 55100 K LUMPUR
CHAPEL OF OUR LADY OF GOOD HEALTH, LRG SATU, KG PANDAN, 55100 K L

CENSUS FORM

NAME OF BEC: ..... ZONE: [ ] Date: .....

HUSBAND: ..... Baptism (Yes / No) H/phone: ..... Profession: .....

WIFE: ..... Baptism (Yes / No) H/phone: ..... Profession: .....

SINGLE: ..... Baptism (Yes / No) H/phone: ..... Profession: .....

ADDRESS: ..... House Tel: .....

NAME OF CHILDREN (STAYING WITH THE FAMILY)		RELATIONSHIP	DATE OF BIRTH	BAPTISM YES / NO	1ST COMM YES / NO	CONFIRMED YES / NO	PROFESSION	LANGUAGE GROUP			
								(E)	(T)	(C)	(BM)
01											
02											
03											
04											
05											
06											
07											
GRAND PARENTS / EXTENDED FAMILY (STAYING WITH THE FAMILY)				BAPTISM (YES/ NO)		RELATIONSHIP WITH HUSBAND / WIFE					
01											
02											
03											
REMARKS:											