(Two Examples of the mode of filling up this Table are given on the other side.)											
FORM A. No. on Form B. 3 RETURN of the MEMBERS of this FAMILY and their VISITORS, BOARDERS, SERVANTS, &c., who slept or abode in this House on the night of SUNDAY, the 31st of MARCH, 1901											
and the second s	NAME and SURNAME.	RELATION to Head of Family.	RELIGIOUS PROFESSION.	EDUCATION.	AGE.	SEX.	RANK, PROFESSION, OR OCCUPATION.	MARRIAGE.	WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb
	who may be out at WORK OF TRAVELLING, &c., during that Night, and who RETTEN HOME ON MONDAY, APRIL 1st. Subject to the above instruction, the Name of the Head of the Family should be written first ; then the names of his Wife, Children, and other Relatives ; then those of Visitors, Boarders, Servants, &c. Christian Name.	State whether "Head of Family,"	State here the particular Religion, or Religious Denomination, to which each person belongs. [Members of Protestant Denomina- tions are requested not to describe themselves by the vague term "Protestant," but to enter the name of the Particular Church, Denomination, or Body, to which they belong.]	State here whether he or she can "Read and Write," can "Read "only, or "Cannot Read."	Years for on last Birth- day. Mont for Infan und one Year	ts Males	home, should be returned as Scholars.	Whether "Married." "Widowa." "Widow," or "Not Married."	If in Ireland, state in what County or City ; if else- where, state the name of the Country.	Write the word "IMBH" in this column opposite the name of each person who speaks IMBH only, and the words "IMBH & ENGLISH" opposite the names of those who can speak both langu- ages. In other cases no entry should be made in this column.	Dumb only; Blind; Imbecile or Idlet; or Lunatic. Write the respective infirmities opposite the name of the afflicted person.
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