## OF IRELAND, 1911. CENSUS

Two Examples of the mode of filling up this Table are given on the other side.

No. on Form B. /2

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 2nd of APRIL, 1911.

-	NAME AND SURNAME.  No Persons absent on the Night of Sunday, April 2nd, to be entered here; except those (not enumerated elsewhere) who may be out at Work or Travelling, &c., during that Night, and who return Home on Monday, April 3rd.  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.		RELATION to Head of Family.  State whether "Head of Family," or "Wife," "Son," "Daughter,"	RELIGIOUS PROFESSION.  State here the particular Religion, or Religious Denomination to which each person	EDUCATION.	Insert Age opposite each name:—the Ages of Males in column 6, and the Ages of Females in column 7.		State the particular Rank, Profession, Trade, or other Employment of each person. Children or young persons attending a School, or receiving regular instruction at home, should be returned as Scholars. [No entry should be made in the case of wives, daughters, or other female relatives solely engaged in domestic duties at home.]	PARTICULARS AS TO MARRIAGE.				WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb; Dumb only; Blind; Imbecile or Idiot;
more.					State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."				Wl;ether	years the present Marriag If no children be alive, write "No in column 11.		orn alive to Marriage. dren born e "None"	If in Ireland, state in what County or City; if elsewhere, state the name of the Country.	only, and the words	Write the respec- tive infirmities opposite the nam of the afflicted person.
						Ages of Males.	Ages of Females.	Before filling this column you are requested to read the instructions on the other side.		"under one."	Children born alive.	still living.			15.
	Christian Name.	Name. Surname.			*			8.	9.	10.	11.	12.	13.	14.	10.
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I hereby certify, as required by the Act 10 Edw. VII., and 1 Geo. V., cap. 11, that the foregoing Return is correct, according to the best of my knowledge and belief.

Wy Brien \_Signature of Enumerator. John Prior \_\_\_\_Signature of Head of Family.