## CENSUS OF IRELAND, 1911.

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

## FORM A.

No. on Form B.

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 AN  | D SURNAME.   | "Head of<br>Family," or<br>"Wife,"<br>"Son," | RELIGIOUS PROFESSION.  State here the particular Religion, or Religious Denomination, to which each person belongs.  [Members of Protestant Denominations are requested not to describe themselves by the vague term "Protestant," but to enter the name of the Particular | EDUCATION.  | AGE (last Birthday) and SEX.  Insert Age opposite each name:—the Ages of Males in column 6, and the Ages of Females in column 7.  For Infants under one year state the age in months, as "under 1 month," "1 month," "2 months," &c. |                  | 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.]  Before filling this column you are re- quested to read the instructions on the other side. | PARTICULARS AS TO MARRIAGE.                         |   |   |                              | WHERE BORN.   | IRISH LANGUAGE.   | If Deaf and Dumb<br>Dumb only ;<br>Blind ;                                 |
|---------|--|--|--|--|---|--|------------------|---|---|---|---|------------------------------|---|---|--|
| Number. | merated elsewhere) will TRAVELLING, &c., do RETURN HOME ON M.  Subject to the above instruction Head of the Family then the names of | truction, the Name of the should be written first; his Wife, Children, and then those of Visitors, |  |  | State here whether he<br>or she can "Read<br>and Write," can<br>"Read" only, or<br>"Cannot Read." |  |                  |   | Whether "Married," "Widower," "Widow," or "Single." | Completed<br>years the<br>present<br>Marriage<br>has lasted.<br>If less | If no children born<br>alive, write "None"<br>in column 11. |                              | If in Ireland, state in what County or City; if elsewhere, state the name of the Country. | Write the word "IRISH" in this column opposite the name of each person who speaks IRISH only, and the words "IRISH & ENGLISH" opposite the names of those who can speak both languages. In other cases no entry | Write the respective infirmities opposite the nam of the afflicted person. |
| -       | Christian Name. Surname.   |  | "Servant,"                                   | Church, Denomination, or<br>Body to which they belong.]  |   | Ages<br>of<br>Males.   | Ages of Females. |   |   | than one<br>year, write<br>"under<br>one."                              | Total<br>Children<br>born<br>alive.                         | Children<br>still<br>living. |   | should be made in<br>this column.   |  |
| 4       | 1.   | 2.   | 3.   | 4.   | 5.  | 6.   | 7.               | 8.  | 9.  | 10.   | 11.   | 12.                          | 13.   | 14.   | 15.  |
| 1 2     | Thomas   | Heeren   | Head of fam                                  | by Roman Catholic  | Cannot read   | 7.5  | 75               |   | Married   |   |   |                              | Co Cavan  |   |  |
| 3       | lich   | Ferfratrick  | 1  | 200000000000000000000000000000000000000  | reced swrite  | 56   |                  | -D 1  | single  |   |   |                              | le o Cavas  |   |  |
| 5       |  |  | . 34   |  |   |  |                  |   |   |   |   |                              |   |   |  |
| 6       |  |  |  |  |   |  |                  |   |   |   |   |                              |   |   |  |
| 8       |  |  |  |  |   |  |                  |   |   |   |   |                              |   |   |  |
| 0       |  |  |  |  |   |  |                  |   |   |   |   |                              |   |   |  |
| 2       |  |  |  |  |   |  |                  |   |   |   |   |                              |   |   |  |
| 3       |  |  |  |  |   |  |                  |   |   |   |   |                              | *   |   |  |
|         |  |  |  |  |   |  |                  |   |   |   |   |                              |   |   |  |

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.

James Unligan Con Signature of Enumerator.

I believe the foregoing to be a true Return.

Thomast Geeten Signature of Head of Family.