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.

	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. Christian Name. Surname.		RELATION to Head of Family. State whether "Head of Family," or "Wife," "Son," "Daughter," or other Relative; "Visitor," "Boarder," "Servant," &c.	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 Church, Denomination, or Body to which they belong.]	EDUCATION.	For Infants under one year state the age in		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.		PARTICULARS AS TO MARRIAGE.			WHERE BORN.	IRISH LANGUAGE.	If Deaf and Dumb; Dumb only; Blind;	
					State here whether he or she can "Read and Write," can "Read" only, or "Cannot Read."					Whether "Married," "Widower,"	State for each Married Woman entered on this Schedule the number of :—			Write the word "IRISH" in this column opposite the	Imbecile or Idiot or Lunatic.	
Number.											years the	If no children born alive, write "None"		in what County or City; if elsewhere, state the name of the Country.	name of each person who speaks IRISH only, and the words "IRISH & ENGLISH"	Write the respective infirmities opposite the name of the afflicted person.
												Total Children born alive.	Children still living.		should be made in this column.	
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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.

James On lo mot Signature of Enumerator.

I believe the foregoing to be a true Return.

funes las lem an Signature of Head of Family.