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.

| | 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," 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. | a or amanes under one | | RANK, PROFESSION, OR OCCUPATION. | 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." | | | person. Children or young persons attending a School, or receiving regular instruction at home, should be returned as Scholars. | Whether "Married," "Widower," "Widow." | 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 Lunatie. | |
| Number | | | | | | | | | | Completed years the present Marriage has lasted. If less | present Marriage. If no children born alive, write "None" | | in what County or City; if elsewhere, | name of each person who speaks Irish only, and the words "Irish & English" opposite the names of those who can speak both languages. In | Write the respective infirmities opposite the name of the afflicted person. |
| | Christian Name. Surname. | of | | | | Ages of Females. | Before filling this column you are requested to read the instructions on the other side. | | than one year, write "under one." | Total Children born alive. | Children still living. | | other cases no entry 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.

Bernard Paughran Const Signature of Enumerator.

I believe the foregoing to be a true Return.

Rose Rully Signature of Head of Family