

October 2011 MASS ATTENDANCE COUNT

Name of Parish: _____
 City: _____

WEEKEND 1	DATE:		
	# Adults	# Children/ Teens	TOTAL
Saturday Time:			
Saturday Time:			
Sunday Time:			
Sunday Time:			
Sunday Time:			
Sunday Time:			
Sunday Time:			
Sunday Time:			
Sunday Time:			
TOTALS			
COMBINED TOTAL			

WEEKEND 2	DATE:		
	# Adults	# Children/ Teens	TOTAL
Saturday Time:			
Saturday Time:			
Sunday Time:			
Sunday Time:			
Sunday Time:			
Sunday Time:			
Sunday Time:			
Sunday Time:			
Sunday Time:			
Sunday Time:			
TOTALS			
COMBINED TOTAL			

<u>Total</u> Attendance for Two (2) Weeks	
<u>Average</u> Attendance per Weekend	

Seating Capacity=	
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Pastor's Signature _____

Return Form To: shay.janet@aod.org or Fax: 313-237-5869