SUMMARY OF ACTIVITIES – January 1, 20\_\_\_\_ through December 31, 20\_\_\_\_

Council Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **MEMBERSHIP:**

* # of attached Praesidia:  \_\_\_\_\_
Senior Praesidia     \_\_\_\_\_ Junior Praesidia \_\_\_\_\_\_
* # of Parishes with the Legion: \_\_\_\_\_     # of Non-Parochial Praesidia: \_\_\_\_\_
* # of Spiritual Directors:
\_\_\_\_\_ Priests     \_\_\_\_\_ Deacons     \_\_\_\_\_ Religious     \_\_\_\_\_ Tribunes
* Senior Members:  \_\_\_\_\_ Total, including \_\_\_\_\_ Praetorians
* Junior Members:  \_\_\_\_\_ Total, including \_\_\_\_\_ Praetorians
* Auxiliary Members: \_\_\_\_\_ Total, including \_\_\_\_\_ Adjutorians

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| --- | --- |
| **TANGIBLE RESULTS** | **TOTAL**  |
| Conversions as aresult of Legion assignment |   |
| Returns to theSacraments as a result of Legion assignment |   |
| Marriages Validatedas a result of Legion assignment |   |
| Adults Baptized asa result of Legion assignment |   |
| Adults Confirmed asa result of Legion assignment |   |
| Children Baptizedas a result of Legion assignment |   |
| Children Confirmedas a result of Legion assignment |    |
| Persons Registeredin a Parish as a result of Legion assignment |   |
| Adults Enrolled inRCIA by your praesidium |    |
| ChildrenTransferred to Catholic School as a result of Legion assignment |   |
| Adults Instructedin RCIA by legionaries |    |
| Children Instructedin CCD by legionaries |    |
| Enthronements ofthe Sacred Heart in the Home |    |
| FamilyConsecrations to the Sacred Heart of Jesus |  |
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| **TYPE OF WORK** | **TOTAL** |
| Door-to-DoorEvangelization Calls |    |
| Street ApostolateContacts |   |
| Pilgrim VirginVisits |    |
| Shut-in Visits  |   |
| Auxiliary Visits  |   |
| Bereavement Calls  |   |
| New Family Visits |    |
| Visits to NewlyBaptized |   |
| Miscellaneous HomeVisits |   |
| # of HospitalsVisited Regularly |   |
| # of Nursing HomesVisited Regularly |   |
| # of OtherInstitutions Visited Regularly |  |
|  |  |
|  |   |
|  |   |

Please report any other outstanding works done in your area during this period:

*(You may attach additional sheets as needed.)*

 ***Please include a list of the locations of any non-parochial Praesidia.
It is NOT necessary to include a list of hospitals, nursing homes, prisons, & other institutions.***