

PARISH REGISTRY INFORMATION SHEET

DATE: _____

Name (Full) _____

Street _____

City: _____ **St** _____ **Zip** _____

Telephone (home) _____ **(other)** _____

E-mail Address _____

Mailing Address or Summer/Winter Address (if different):

Street _____

City: _____ **St** _____ **Zip** _____

Telephone (home) _____ **(other)** _____

Personal Information:

Birthdate: _____ **City** _____ **State** _____

Marital Status: Single _____ Married _____ Anniv _____ Widowed _____

Spouse's Name (even if deceased) _____

Baptism:

Name of Church _____

Address (city, state) _____

Date _____ **Rector** _____

Confirmation:

Name of Church _____

Address (city, state) _____

Date _____ **Bishop** _____

Church Affiliation: Member of St. Mark's _____ Member of Other _____

Name of Church if Other _____

Address _____

City, State _____

Telephone _____ **Rector** _____

I would like to become a member of St Mark's _____