

Saint Mary's Anglican Church

Please take a few minutes to fill-out this information form so that our records are accurate

Head of Household:

Name: _____ Nickname: _____

Address: _____

Occupation: _____ Email: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Date of Birth: _____ Baptized? _____ Confirmed? _____

Marital Status: _____ Date Married: _____

Special Needs or Comments: _____

Previous Church (if any): _____

How did you hear about St. Mary's? _____

Spouse:

Name: _____ Nickname: _____

Address: _____

Occupation: _____ Email: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Date of Birth: _____ Baptized? _____ Confirmed? _____

Special Needs or Comments: _____

Dependent Children:

Name: _____ Nickname: _____

Date of Birth: _____ Baptized? _____ Confirmed? _____

Special Needs or Comments: _____

Name: _____ Nickname: _____

Date of Birth: _____ Baptized? _____ Confirmed? _____

Special Needs or Comments: _____

Name: _____ Nickname: _____

Date of Birth: _____ Baptized? _____ Confirmed? _____

Special Needs or Comments: _____

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Please list the names of members of your household who would like to participate in, or would like additional information about, the following Lay Ministry opportunities. We welcome your help!

Ministry	Name	Name	Name
Acolyte/Crucifer			
Altar Guild Ministry Team			
Bible Study Leader			
Music Ministry Team			
Daughter of the Holy Cross			
Hospitality Ministry Team			
Lector Ministry Team			
LEM			
Men's Group			
Prayer Chain			
Scribes (<i>Bulletin Folders</i>)			
Sunday School Student			
Sunday School Teacher			
Usher/Greeter Ministry Team			
Welcoming Committee			
Youth Group Ministry Team			
Other			

Please use this space for **any** comments, ideas, or suggestions: _____

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