

SPBTS Newcomer information Sheet

PLEASE PRINT LEGIBLY

Family Name _____ Marital Status (Optional) S ___ M ___ W ___ D ___ Sep ___

Street Address, City, Zip _____

Home Phone _____ Anniversary Date _____

First Name _____ Middle Name _____ First Name _____ Middle Name _____

Preferred Name _____ Date of birth ___/___/___ Preferred Name _____ Date of birth ___/___/___

Baptism Date _____ Baptism Date _____

Confirmation Date _____ Denomination? _____ Confirmation Date _____ Denomination? _____

Occupation _____ Occupation _____

Cell phone _____ Cell phone _____

Email address _____ Email address _____

Would you like for your email address to be added to our "Information Web?" The Information Web is a means of reaching the congregation with weekly reminders of events and important or urgent updates. Yes ___ No ___

I would prefer to receive the monthly newsletter via: Email ___ Postal Service ___ (Please check one)

Please list children under the age of 18 and living at home:

Full Name _____

Full Name _____

Preferred Name _____

Preferred Name _____

Date of Birth ___/___/___ Baptism Date ___/___/___

Date of Birth ___/___/___ Baptism Date ___/___/___

Full Name _____

Full Name _____

Preferred Name _____

Preferred Name _____

Date of Birth ___/___/___ Baptism Date ___/___/___

Date of Birth ___/___/___ Baptism Date ___/___/___

If you would like to transfer your membership to St. Paul's by-the-Sea, we will contact the church where your church membership is currently recorded.

I wish to transfer my membership from _____ Church
(Church name and denomination)

In the city of _____.

Confirmation in the Episcopal church is not a prerequisite for membership. It is required, however, in order to hold a position of leadership. If you have not been confirmed and would like to be notified when the next classes for confirmation are scheduled, please note below.

_____ I am interested in Confirmation.

_____ I am Roman Catholic and wish to be received into the Episcopal Church