

Christ's Church

Membership Information Sheet

Please complete if you would like to be a member and receive church mailings.

PLEASE PRINT

Last name (s) of family: _____

Members First Name	Middle Name	Role (ie: Father, daughter)	Birth date	Baptism date (if known)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Mailing Address: _____

Preferred Phone _____ (Home ___ Work ___ Cell ___)

E-mail(s) Please designate whose _____

* Work Phone(s) Please designate whose _____

* Cell Phone (s) Please designate whose _____

Are you currently receiving mailings from our Parish?

Yes ___ No ___

Please note that all information is kept confidential.

* Optional information.

Date _____