

ST. ANDREW PARISH CHURCH
HALF WAY TREE, KINGSTON 10

DEVELOPMENT RESOURCES INITIATIVE

MEMBERSHIP DATA FORM

A. HOUSEHOLD RECORD

Name: _____ (To which Household Mail should be addressed)

Mailing Address: _____

Telephone(s) _____ Home Phone _____ Cell Phone _____

E-mail Address: _____

Comments: _____

Members of this Household:

Name	Relationship:
1. _____	_____ (Head of Household)
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

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Household Mailing Name:	_____
Household Address:	_____

B. INDIVIDUAL RECORD

Title (Mr, Mrs, Hon, Dr. etc.): _____

First Name: _____ Middle Name(s): _____

Preferred Name: _____ Use Preferred Name on Reports?: Y/N _____

Last Name: _____

Suffix (Jr, Sr, II, OJ, CD, etc.) _____

Envelopes: Y / N _____ If No – Do you want envelopes? Y/N _____

Membership Status: Full Member:___ Inactive:___ Non-member Spouse:___ Out-of-town Member:___ Potential Member:___

Membership Date: Mm _____ Dd _____ Yy _____

Family Relationship: (to Head) Head of Household:___ Husband:___ Wife:___ Spouse:___ Single Parent ___Adult
Son/Daughter:___ Child:___ Parent:___ Grandparent:___ Grandson/daughter:___ Niece:___
Nephew:___ Other (specify): _____

Birth Date: Mm _____ Dd _____ Yyyy _____

School Grade: _____

E-Mail Address(es): _____

Baptism Date: Mm _____ Dd _____ Yy _____

Confirmation Date: Mm _____ Dd _____ Yy _____

Marriage Date: Mm _____ Dd _____ Yy _____

Marital Status: Single:___ Married:___ Separated:___ Divorced:___ Widowed:___

Gender: M _____ F _____

Phone: Work _____ Home _____ Cellular/Mobile _____

How Came to Membership: Confession of Faith:___ Restored:___ From other Anglican Church:___
From Other Denomination:___

Membership of Church Orgs: _____

Committee Membership: _____

Membership in Classes: _____

Professional Skills: _____

Other Skills and Interests _____

Personal Alternate Address: *(If the Household Mailing Address is not the residential address, put residential address here; this may also be a secondary residence, school/college address, address on overseas or out-of-town assignment, etc)*

Dates: From Mm _____ Dd _____ Yy _____ to Mm _____ Dd _____ Yy _____

Address: _____

City: _____

Postal/Zip Code: _____

Phone: _____ (land line) _____ (cellular)