

HOLY SACRAMENT EPISCOPAL CHURCH

MEMBERSHIP FORM

NAME: _____
(Title) (First) (Middle) (Last)

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE (Home): _____ **(Work):** _____ **(Cell):** _____

EMAIL (Home): _____ **(Work):** _____

DATE OF BIRTH: ____/____/____ **PROFESSION:** _____
(Month) (Day) (Year)

STATUS: Single Married **ANNIVERSARY DATE:** ____/____/____
(Month) (Day) (Year)

BAPTIZED: Yes No **CONFIRMED:** Yes No

Date of Baptism: ____/____/____ Date of Confirmation: ____/____/____
(Month) (Day) (Year) (Month) (Day) (Year)

NAME: _____
(Title) (First) (Middle) (Last)

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE (Home): _____ **(Work):** _____ **(Cell):** _____

EMAIL (Home): _____ **(Work):** _____

DATE OF BIRTH: ____/____/____ **PROFESSION:** _____
(Month) (Day) (Year)

STATUS: Single Married **ANNIVERSARY DATE:** ____/____/____
(Month) (Day) (Year)

BAPTIZED: Yes No **CONFIRMED:** Yes No

Date of Baptism: ____/____/____ Date of Confirmation: ____/____/____
(Month) (Day) (Year) (Month) (Day) (Year)

See Overleaf

CHILDREN:

NAME: _____ **DATE OF BIRTH:** _____ / _____ / _____
mm dd yyyy

BAPTIZED: Yes No

CONFIRMED: Yes No

Date of Baptism: _____ / _____ / _____
mm dd yyyy

Date of Confirmation: _____ / _____ / _____
mm dd yyyy

NAME: _____ **DATE OF BIRTH:** _____ / _____ / _____
mm dd yyyy

BAPTIZED: Yes No

CONFIRMED: Yes No

Date of Baptism: _____ / _____ / _____
mm dd yyyy

Date of Confirmation: _____ / _____ / _____
mm dd yyyy

NAME: _____ **DATE OF BIRTH:** _____ / _____ / _____
mm dd yyyy

BAPTIZED: Yes No

CONFIRMED: Yes No

Date of Baptism: _____ / _____ / _____
mm dd yyyy

Date of Confirmation: _____ / _____ / _____
mm dd yyyy

NAME: _____ **DATE OF BIRTH:** _____ / _____ / _____
mm dd yyyy

BAPTIZED: Yes No

CONFIRMED: Yes No

Date of Baptism: _____ / _____ / _____
mm dd yyyy

Date of Confirmation: _____ / _____ / _____
mm dd yyyy