



First-St. Andrew's Database Membership Information

Address: _____

City: _____ Postal Code: _____

Home Telephone: _____

ADULT 1

Title			
First name(s)			
Last name			
Gender			
Birthday			
Are you a member of FSA?			
If YES			
Date of Baptism		Marital Status	
Date of Confirmation		Wedding Date	
Occupation(s)			
Cell phne			
Preferred method of giving	Pre-authorized Remittance (PAR)		Weekly Envelopes
Email Address			

*By signing below, you are giving FSA permission to use your email address for internal communication

Signature: _____

ADULT 2

Title			
First name(s)			
Last name			
Gender			
Birthday			
Are you a member of FSA?			
If YES			
Date of Baptism		Marital Status	
Date of Confirmation		Wedding Date	
Occupation(s)			
Cell phne			
Preferred method of giving	Pre-authorized Remittance (PAR)		Weekly Envelopes
Email Address			

*By signing below, you are giving FSA permission to use your email address for internal communication

Signature: _____



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May we list your name, address, telephone & email in our church directory? YES _____ NO _____

May we use church-based photographs for church publications (including the website)? YES _____ NO _____

Would you like to have regular visits from a Pastoral Care Visitor? YES _____ NO _____

Would you find it helpful to have a ride to service and to church-sponsored events? YES _____ NO _____

Do you have a vehicle which you drive regularly? YES _____ NO _____

Would you be willing to drive others to church events? YES _____ NO _____

CHILD 1

First name(s)	
Last name	
Gender	
Birthdate	
Date of Baptism	
Date of Confirmation	
School Grade	
Sunday School	

CHILD 2

First name(s)	
Last name	
Gender	
Birthdate	
Date of Baptism	
Date of Confirmation	
School Grade	
Sunday School	

CHILD 3

First name(s)	
Last name	
Gender	
Birthdate	
Date of Baptism	
Date of Confirmation	
School Grade	
Sunday School	