

Member Information St. Paul's Episcopal Church, Ventura

	You	ır Name(s):							
7	Residence:								
CONTACT INFORMATION	Mailing Address (if different)								
	Occupation:								
	Phone (primary):		cell/home/business					cell/home/business	
	Pho	Phone (secondary):		cell/home/business				cell/home/business	
	E-m	E-mail address:							
Ö	I would like to receive the E-news weekly or occasionally.		Weekly/Occasionally			Weekly/Occasionally			
	Please contact the office if you do not want your contact information made available in the member director directory is online and only available to St. Paul's staff and congregation by invitation. Your e-mail address provided to the diocese so you may receive the diocesan Episcopal News unless we are notified otherwise.				nail address will be				
	Birthdate:								
	Marital Status:								
	Have you been:					<u> </u>			
RDS	Baptized		Y/N	Where (church name, location)/When:		Y/N	Where (church name, location)/When:		
RECC	Confirmed		Y/N	Where (church name, location)/When		Y/N	Where (church n	ame, location)/When	
CHURCH RECORDS	Received		Y/N	Where (church name, location)/When		Y/N	Where (church name, location)/When		
СН	Married		Y/N	Where (church name, location)/When		Y/N	N Where (church name, location)/When		
	Did you transfer membership from another church?		Y/N	From where (church name, location):		Y/N	From where (church name, location):		
Name/Relationship/Contact Information:									
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EMERGENCY	\CT								
RG	NT								
ME	CO								
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	Name	Relationship	Baptized (where/when)	Confirmed (where/when)
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FAM				

If any family members would like to receive separate communications from St. Paul's, please note their contact information.

If you would like to connect with like-minded members of the parish, list your hobbies and interests below.

OBBIES & TERESTS	
HOB	

What else would you like us to know about you and your family?