

CHRIST CHURCH

415 Washington Street Toms River, NJ 08757 732-349-5506

www.christchurchtomsriver.org

christchurch@verizon.com

NEW MEMBER INFORMATION FORM

Today's Date: _____

Household Address _____

Phone # _____

Please complete the below questions as best as possible for each family member desiring to become a member of Christ Church.

1. Full Name _____ Occupation _____

Email Address _____ (optional) Cell # _____ (optional)

Sex _____ Age _____ Birthdate _____ Single/Widow(ed)/Married (Date _____)

Have you been Baptized? _____ Have you been Confirmation? _____ If so, where and when?

2. Full Name _____ Occupation _____

Email Address _____ (optional) Cell # _____ (optional)

Sex _____ Age _____ Birthdate _____ Single/Widow(ed)/Married (Date _____)

Have you been Baptized? _____ Have you been Confirmation? _____ If so, where and when?

Others in the same household who wish to become member (children, etc.)

a. Full Name _____ Sex _____ Age _____ Birthdate _____

Email Address _____ (optional) Cell # _____ (optional)

Have you been Baptized? _____ Have you been Confirmation? _____ If so, where and when?

Relationship to #1 _____ Occupation _____

Email Address _____ (optional) Cell # _____ (optional)

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C H R I S T C H U R C H

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b. Full Name _____ Sex ____ Age ____ Birthdate _____

Have you been Baptized? _____ Have you been Confirmation? _____ If so, where and when?

c. Relationship to #1 _____ Occupation _____

Email address _____ (optional) Cell # _____ (optional)

Sex ____ Age ____ Birthdate _____ Single/Widow(ed)/Married (Date _____)

Have you been Baptized? _____ Have you been Confirmation? _____ If so, where and when?

Use a separate sheet(s) of paper for additional family members if necessary.

How did you find Christ Church or hear about us? _____

Religious Denomination (if other than Episcopal) _____

Are you coming to us from another Episcopal Church?

If you have not been attending an Episcopal Church, but were baptized or confirmed as an Episcopalian, give the name of that church.

Canon Law requires that a Letter of Transfer be tendered whenever a person leaves one Episcopal Church for another. Please give some information and this office will request a Letter of Transfer.

Information Need for a Letter of Transfer:

Your Name (at the time that you attended your former parish)

Name of Church _____

Address _____ (if known)

City, State, Zip code _____

A nametag will be created for each family member listed. These will be stored in the nametag boxes for your retrieval each time you come to Christ Church.