# St. Alban's EPISCOPAL CHURCH welcomes you

# **MEMBERSHIP FORM**

Please complete and return to: parishadmin@saintalbansdavidson.org, or 301 Caldwell Lane, Davidson, NC 28036

Today's Date: \_

Family Phone Number:

#### Mailing address: \_

Thank you for your interest in St. Alban's Episcopal Church, www.saintalbansdavidson.org! Whether you are a *friend, active* or *voting* member, we welcome you as part of our faith community. Here's what qualifies you as a *friend, active* or *voting* member...

<u>Friend</u> – Anyone who has a connection to our parish but does not yet wish to become a member, such as a preschool parent, etc.

<u>Active Member</u> – Anyone who (1) has been baptized in any Christian faith, (2) has made a recorded financial contribution during the past year, (3) has received Holy Communion here three times in the past year, and (4) has completed the membership form.

**Voting Member**\_– Anyone who (1) fulfills the four qualifications for an active member, (2) is at least sixteen years old, and (3) has been confirmed or received in the Episcopal Church.

Full Name		Nickname	
Gender	Date of Birth	Primary Phone	
Email		Alternate Phone	
Marital Status		Anniversary Date	
Place of Baptism and Denomination		Date of Baptism	
Place of Confirmation and Denomination		Date of Confirmation	
Place Received into Episcopal Church		Date of Reception	

#### Adult Information: Please complete below for all adults in household.

Full Name		Nickname	
Gender	Date of Birth	Primary Phone	
Email		Alternate Phone	
Marital Status		Anniversary Date	
Place of Baptism and Denomination		Date of Baptism	
Place of Confirmation and Denomination		Date of Confirmation	
Place Received into Episcopal Church		Date of Reception	

Child #1: Please complete below for all children in household

Name		Date of Birth	Gender		
Carl	S -la1 A the se dime				
Grade School Attending					
Place of Baptism and Denomination		Date of Baptism	Date of Baptism		
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Place of Confirmation and Denomination		Date of Confirmation	Date of Confirmation		
Place Received into Episcopal Church		Date of Reception	Date of Reception		

# Child #2

Name		Date of Birth	Gender	
Grade	School Attending			
Place of Baptism and Denomination		Date of Baptism		
Place of Confirmation and Denomination		Date of Confirmation		
Place Received into Episcopal Church		Date of Reception		

### Child #3

Name		Date of Birth	Gender
Grade School Attending			
Place of Baptism and Denomination		Date of Baptism	
Place of Confirmation and Denomination		Date of Confirmation	
Place Received into Episcopal Church		Date of Reception	

# Child #4

Name		Date of Birth	Gender	
Grade School Attending				
Place of Baptism and Denomination		Date of Baptism	Date of Baptism	
Place of Confirmation and Denomination		Date of Confirmation	Date of Confirmation	
Place Received into Episcopal Church		Date of Reception	Date of Reception	