

Church of the Redeemer

Member Information Form

Full Name: _____

Goes by Name: _____

Date of Birth: _____ / _____ / _____

Street Address: _____

Phone: _____

Email: _____

Are You Transferring from Another Episcopal church? Yes No

Name of Church: _____

City and State of Church: _____

Have You Been Baptized? Yes No

Date of Baptism: _____ / _____ / _____

Name of Church: _____

City and State of Church: _____

Have You Been Confirmed? Yes No

Date of Confirmation: _____ / _____ / _____

Name of Church: _____

City and State of Church: _____

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Marital Status: _____

Name of Spouse: _____

Date of Wedding Anniversary: _____ / _____ / _____

Name(s) of Children: _____

Please contact Church of the Redeemer Welcome Coordinator Anne Ayres
at AAyres@RedeemerSarasota.org or 941-955-4263 with any questions.