



# St. Matthew's Episcopal Church – New Member / Family Profile Form

1520 Oak Road  
Snellville, GA 30078-2230

[admin@stmatthewssnellville.org](mailto:admin@stmatthewssnellville.org)  
770-979-4210

[registrar@stmatthewssnellville.org](mailto:registrar@stmatthewssnellville.org)  
[www.stmatthewssnellville.org](http://www.stmatthewssnellville.org)

Please complete this Family Profile information form & place the form in the lock box in the parish office door. Your completed pledge card should be placed in a sealed envelope and deposited it in the Senior Warden's mailbox or the parish office lock box.

Date \_\_\_\_\_

Please print plainly:

|  |
|--|
| <p>_____ I /my family wish(es) to join St. Matthew's Episcopal Church. (Previously unaffiliated or from another denomination)</p> <p>Previous church membership (church name/city, state) _____</p> <p>_____ (Episcopalian): Please transfer my letter of membership for (check one) _____ All family members _____ The following members: _____</p> <p>from _____ Episcopal Church in _____</p> <p>Diocese of _____ (City, State)</p> |
|--|

May we share family contact info in our parish directory? Yes / No

## Adult Household Member #1 – Family Last Name \_\_\_\_\_

\_\_\_\_\_ M / F \_\_\_\_/\_\_\_\_/\_\_\_\_

|                            |                      |                               |                |              |            |            |
|----------------------------|----------------------|-------------------------------|----------------|--------------|------------|------------|
| (First)                    | <b>NAME</b>          | (Middle/Maiden)               | Name Preferred | (Circle One) | Birth Date | Birthplace |
| Title _____                | Marital Status _____ | Anniversary if married: _____ |                |              |            |            |
| (Mr., Mrs., Ms., Dr. etc.) |                      |                               |                |              |            |            |
| Baptized:                  | Yes                  | No                            | _____          | _____        | _____      | _____      |
|                            |                      |                               | Date           |              | Place      |            |
| Confirmed:                 | Yes                  | No                            | _____          | _____        | _____      | _____      |
|                            |                      |                               | Date           |              | Place      |            |

Home Address: \_\_\_\_\_  
Street / Apt# \_\_\_\_\_ City / State \_\_\_\_\_ Zip : \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Preferred Email \_\_\_\_\_

Preferred Method of Contact (check one) Email \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Text Okay? Yes / No

## Adult Household Member #2 – Last Name (if different) \_\_\_\_\_

\_\_\_\_\_ M / F \_\_\_\_/\_\_\_\_/\_\_\_\_

|                       |                      |                               |                |              |   |            |
|-----------------------|----------------------|-------------------------------|----------------|--------------|---|------------|
| (First)               | <b>NAME</b>          | (Middle)                      | Name Preferred | (Circle One) | Birth Date                                    | Birthplace |
| Title _____           | Marital Status _____ | Anniversary if married: _____ |                |              | Joining St. Matthew's? Yes / Not at this time |            |
| (Mr., Mrs., Dr. etc.) |                      |                               |                |              |   |            |
| Baptized:             | Yes                  | No                            | _____          | _____        | _____   | _____      |
|                       |                      |                               | Date           |              | Place   |            |
| Confirmed:            | Yes                  | No                            | _____          | _____        | _____   | _____      |
|                       |                      |                               | Date           |              | Place   |            |

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Preferred Email \_\_\_\_\_

## Children Living At Home:

#1 NAME \_\_\_\_\_ M / F \_\_\_\_\_

|                      |            |                             |                |              |
|----------------------|------------|-----------------------------|----------------|--------------|
| (First)              | (Middle)   | (Last if different)         | Name Preferred | (Circle One) |
| ____/____/____       | _____      | _____                       | _____          | _____        |
| Birth Date           | Birthplace | Grade                       | School         |              |
| Baptism Information: | _____      | _____                       |                |              |
|                      | Date       | Place (Church, City, State) |                |              |
| Confirmation:        | _____      | _____                       |                |              |
|                      | Date       | Place (Church, City, State) |                |              |

**Children Living At Home (use additional sheet of paper for family members if necessary):**

**#2 NAME** \_\_\_\_\_ **M / F**  
\_\_\_\_\_ **(First)** \_\_\_\_\_ **(Middle)** \_\_\_\_\_ **(Last if different)** \_\_\_\_\_ **Name Preferred** \_\_\_\_\_ **(Circle One)**  
\_\_\_\_/\_\_\_\_/\_\_\_\_  
**Birth Date** \_\_\_\_\_ **Birthplace** \_\_\_\_\_ **Grade** \_\_\_\_\_ **School** \_\_\_\_\_  
**Baptism Information:** \_\_\_\_\_  
\_\_\_\_\_ **Date** \_\_\_\_\_ **Place (Church, City,, State)**  
**Confirmation:** \_\_\_\_\_  
\_\_\_\_\_ **Date** \_\_\_\_\_ **Place (Church, City , State)**

**#3 NAME** \_\_\_\_\_ **M / F**  
\_\_\_\_\_ **(First)** \_\_\_\_\_ **(Middle)** \_\_\_\_\_ **(Last if different)** \_\_\_\_\_ **Name Preferred** \_\_\_\_\_ **(Circle One)**  
\_\_\_\_/\_\_\_\_/\_\_\_\_  
**Birth Date** \_\_\_\_\_ **Birthplace** \_\_\_\_\_ **Grade** \_\_\_\_\_ **School** \_\_\_\_\_  
**Baptism Information:** \_\_\_\_\_  
\_\_\_\_\_ **Date** \_\_\_\_\_ **Place (Church, City, State)**  
**Confirmation:** \_\_\_\_\_  
\_\_\_\_\_ **Date** \_\_\_\_\_ **Place (Church, City, State)**