



The Episcopal Church
of the
Good Shepherd

PARISH UPDATE FORM
2016

LAST NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: (_____) _____

	Individual Data	Head of Household	Spouse	Child	Child	Child	Child
1	First Name						
2	Preferred Name						
3	Middle Name						
4	Last Name (if different)						
5	Title						
6	Gender (M/F)						
7	Birthday (MM/DD/YY)						
8	Marital Status (M, D, W, S)						
9	Anniversary MM/DD/YY						
10	Cell Phone						
11	Work Phone						
12	Email Address						
13	Baptism date(approx date if not known)						
14	Confirmation date (approx date if not known)						

#7- M = Married; D = Divorced; W = Widowed; S = Single

SEE OVER

