

The Episcopal Church of the Good Shepherd  
Member Profile Update Form

Household Name: \_\_\_\_\_

Household Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Home Email: \_\_\_\_\_

Alternate Address: \_\_\_\_\_

When should the alternate address be used? \_\_\_\_\_

**Adult A – General Information** Email address: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Anniversary: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Date of Confirmation: \_\_\_\_\_

I have been attending Good Shepherd since: \_\_\_\_\_

*(Please fill in where applicable)*

I received the “laying on of hands” (confirmation) in the \_\_\_\_\_ church and would like to be “received” in the Episcopal Church. Yes \_\_\_\_\_ No \_\_\_\_\_

I transferred to Good Shepherd from \_\_\_\_\_ in \_\_\_\_\_ (year).

I have not transferred to Good Shepherd from \_\_\_\_\_ where I am a member, but I would like to do so. Yes \_\_\_\_\_ No \_\_\_\_\_ *(Please provide address of church below.)*

**Adult B – General Information** Email address: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Anniversary: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Date of Confirmation: \_\_\_\_\_

I have been attending Good Shepherd since: \_\_\_\_\_

*(Please fill in where applicable)*

I received the “laying on of hands” (confirmation) in the \_\_\_\_\_ church and would like to be “received” in the Episcopal Church. Yes \_\_\_\_\_ No \_\_\_\_\_

I transferred to Good Shepherd from \_\_\_\_\_ in \_\_\_\_\_ (year).

I have not transferred to Good Shepherd from \_\_\_\_\_ where I am a member, but I would like to do so. Yes \_\_\_\_ No \_\_\_\_ (Please provide address of church below.)

**Child A – General Information**      Email address: \_\_\_\_\_  
 Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Cell Phone Number: \_\_\_\_\_  
 Date of Baptism: \_\_\_\_\_ Date of Confirmation: \_\_\_\_\_

**Child B – General Information**      Email address: \_\_\_\_\_  
 Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Cell Phone Number: \_\_\_\_\_  
 Date of Baptism: \_\_\_\_\_ Date of Confirmation: \_\_\_\_\_

**Child C – General Information**      Email address: \_\_\_\_\_  
 Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Cell Phone Number: \_\_\_\_\_  
 Date of Baptism: \_\_\_\_\_ Date of Confirmation: \_\_\_\_\_

**Child D – General Information**      Email address: \_\_\_\_\_  
 Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Cell Phone Number: \_\_\_\_\_  
 Date of Baptism: \_\_\_\_\_ Date of Confirmation: \_\_\_\_\_

Ministry Interests:

Acolyte	Eucharistic Minister	Reader
Altar Guild	Fellowship	Sunday School Teacher
Choir – Adult	Flower Delivery	Transportation
Choir – Children	Flower Guild	Usher
Cuba Committee	Office Volunteer	Youth Group
Communications	Outreach	