

Print, complete, and return to the Parish Office. Thank you!

ST. MARK'S EPISCOPAL CHURCH, HAINES CITY, FL - MEMBERSHIP INFORMATION

HOUSEHOLD MAILING NAME: _____

ADDRESS 1: _____

ADDRESS 2: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: _____ UNLISTED PHONE: Y / N

HOUSEHOLD ALTERNATE ADDRESS DATES (MM/DD) _____ / _____ **THRU** _____ / _____

ADDRESS 1: _____

ADDRESS 2: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ UNLISTED PHONE: Y / N

WEDDING ANNIVERSARY: _____

MEMBERS OF THIS HOUSEHOLD

<i>FULL NAME</i>	<i>DATE OF BIRTH</i>	<i>FAMILY RELATIONSHIP</i>	<i>CELL PHONE</i>	<i>EMAIL ADDRESS</i>

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