



# ST. GEORGE'S ANGLICAN CHURCH

Church Management System Database Information Form  
(PLEASE PRINT YOUR ANSWERS)

## ABOUT YOU

Surname: \_\_\_\_\_

Christian Name: \_\_\_\_\_ Middle Name (s) \_\_\_\_\_

Date of Birth: (Month) \_\_\_\_\_ Date \_\_\_\_\_ Year \_\_\_\_\_

Marital Status: \_\_\_\_\_ Gender \_\_\_\_\_

Date of Marriage \_\_\_\_\_

Occupation: \_\_\_\_\_ Place Of Occupation : \_\_\_\_\_

School: \_\_\_\_\_

## HOW TO FIND YOU

Mailing Address: \_\_\_\_\_ House # \_\_\_\_\_ Street: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Directions to your home: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## COMMUNICATING WITH YOU

Home Telephone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Work Phone Contact: \_\_\_\_\_ Other Phone Contact \_\_\_\_\_

Primary Email: \_\_\_\_\_

Secondary Email: \_\_\_\_\_

Do you have a Social Media Account? - i.e. Facebook, Twitter, Instagram etc. \_\_\_\_\_

How can we find you on Facebook or other Social Media? \_\_\_\_\_

*(please turn over and answer the remaining questions)*

## ADDITIONAL FAMILY MEMBERS

Are you the Head of your household? YES \_\_\_\_\_ NO \_\_\_\_\_

Please list the names of any immediate family members **LIVING WITH YOU** who are also members of St. George's Anglican Church and give that relationship. (i.e. Husband, Wife, Son, Daughter, Granddaughter etc..)

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Please list names of family members **NOT LIVING WITH YOU** who are also members of St. George's Anglican Church.

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## YOUR CHURCH INVOLVEMENT

Please indicate which organization or ministry you are presently associated with

Anglican Church Men _____	Anglican Church Women _____	Usher Board _____
Christian Youth Movement _____	Adult Choir _____	Youth Choir: _____
Anglian Young Adults: _____	Altar Servers: _____	Guild to Sick & Needy _____
Altar Guild: _____	Brownies: _____	Guides: _____
Sunday School: _____	Beautification Committee _____	Cursillo: _____
Prayer Ministry: _____	Nurses Ministry: _____	Visitation to Sick: _____
Public Address: _____	Vestry: _____	Administration: _____
Christian Formation: _____	Christian Education: _____	Evangelism: _____
Pastoral Care / Counselling: _____	Communications: _____	Finance: _____
Social Committee:	Other Ministry: _____	

## YOUR FINANCIAL CONTRIBUTION

Do you tithe or give your offering using the envelope scheme? \_\_\_\_\_

If so, please provide your envelope number: \_\_\_\_\_

## PHOTOGRAPH

A photo of you will be necessary to complete your profile in the new Data Base System. If you have a particular photo you wish us to use please email to [saintgeorgenp@gmail.com](mailto:saintgeorgenp@gmail.com), otherwise we will contact you to have a photo taken.