



# The Episcopal Church of the Good Shepherd, Tequesta, FL 33469

"We Have A Place For You"

www.goodsheponline.org 561-746-674

## PARISH REGISTRATION FORM

Date \_\_\_\_\_

Last Name \_\_\_\_\_ Primary Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

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

Marital Status (optional) *circle* S M W D Sep.

Seasonal Resident? Circle Yes No Usual Months in FL \_\_\_\_\_

	First Name (and last, if different)	M/D/Y of Birth (M/D Adults)	Baptized Y or N	Confirmed Y or N	Church Activities of Interest, Skills, Profession, etc.
Head					
Spouse					
Child					
Child					
Child					
Child					

Please add me to the parish mailing list

Please send me a pledge card.

Please transfer my membership from: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

NOTES: