

The Annunciation Greek Orthodox Church of Kansas City, Missouri
 Family Blank Registration Form

Member Registration

Member Detail:	Last Name: _____	Name formats used in mailings:	
	First Name: _____		Mailing Name: _____ <i>Ex: Mr. John Smith</i>
	Middle: _____		Informal Salutation: _____ <i>Ex: John</i>
	Nickname: _____		Formal Salutation: _____ <i>Ex: Mr. Smith</i>
	Maiden Name: _____		
	Title: _____		
	Suffix: _____		

Personal:	Relationship: _____	Type: _____
	Grade/Degree: _____	Gender: _____
	Marital Status: _____	Birthdate: _____
	Language: _____	
	Ethnicity: _____	
	Religion: _____	
	Spec Needs: _____	
	Occupation: _____	
	Mem Status: _____	
	Grad Year: _____	
Receives Separate Statement? _____		Location: _____

Phone/Email:	Phone: _____	Type: _____	Unlisted? _____
	Phone: _____	Type: _____	Unlisted? _____
	Email: _____	Type: _____	

Remarks: _____

Sacraments:	Birthplace: _____	Father's Name: _____
		Mother's Name: _____
		Mother's Maiden Name: _____
	Baptism:	Baptismal Name: _____
		Date _____ Status: _____
		Performed by: _____
		Church Name: _____
		Church Address: _____
		Sponsor(s): _____
	Chrismation:	Chrismation Name: _____
		Date _____ Status: _____
		Performed by: _____
		Church Name: _____
	Church Address: _____	
	Sponsor(s): _____	
Marriage:	Spouse Name: _____	
	Date _____ Status: _____	
	Performed by: _____	
	Church Name: _____	
	Church Address: _____	
	Sponsor(s): _____	

The Annunciation Greek Orthodox Church of Kansas City, Missouri
 Family Blank Registration Form

Member Registration

	Ecclesiastic Divorce:	Extra Info: _____ Date _____ Status: _____ Performed by: _____ Church Name: _____ Church Address: _____ Sponsor(s): _____
	Memorial:	Extra Info: _____ Date _____ Status: _____ Performed by: _____ Church Name: _____ Church Address: _____ Witness(es): _____
	Funeral:	Extra Info: _____ Date _____ Status: _____ Performed by: _____ Church Name: _____ Church Address: _____ Witness(es): _____
	Deceased:	Extra Info: _____ Date _____ Status: _____ Performed by: _____ Church Name: _____ Church Address: _____ Witness(es): _____

Talents:	I would like to volunteer the following skills: _____ _____
-----------------	---

Ministries:	I would like to volunteer for the following ministries: _____ _____
--------------------	---