Parish Registration Form

St. Thomas' Episcopal Church
33 Chestnut St, PO Box 631, Camden, ME 04843

** Ad	**	Additio	onal Ac	ldress (if applica	able)			
		Member 1	r Informat	ion	M	ember 2 (if applic	able)	
** First Name:								
** Last Name:								
Gender/Pronou	ın:							
Date of Birth:								
** Email:								
** Cell Phone								
Baptism:	Yes / No	Yes / No Denomination:			es / No	Denomination:		
Confirmation:	Yes / No	es / No Denomination:		Ye	es / No	Denomination:		
Reception:		If not Confirmed in the Episcopal Church, have			If not Confirmed in the Episcopal Church, have			
•	If not Bapta	you been received? Yes / No If not Baptized or Confirmed, are you interested in talking to the Rector? Yes / No			you been received? Yes / No If not Baptized or Confirmed, are you interested in talking to the Rector? Yes / No			
	Chil	dren/Other	Member	Inforn	nation	1		
** First Name	** Last Name	Gender/Pronoun	Birthdate	Bapti Denom		Confirmed? Denomination	Relationsh	
* Information wil ot want publishe	-			y. Pleas	e indic	ate any inforn	nation you d	

Ministries at St. Thomas'

St. Thomas' Episcopal Church
33 Chestnut St, PO Box 631, Camden, ME 04843

I an	n interested in the following volunteer opportunities:
	Acolytes
	Altar Guild
	Building and Grounds
	Choir
	Christian Education
	Communications and Publicity
	Fairs and Fun
	Finance and Endowment
	Flower Guild
	Lay Eucharistic Ministers
	Lay Eucharistic Visitors
	Lectors
	Livestreaming of Services/Video Production
	Outreach Committee
	Pastoral care
	Stewardship Committee
	Ushers
	Vestry
	Youth Ministry
	Other
Naı	me:
Plea	ase contact me by Email: Phone:

Please contact our Office Volunteers (<u>officevolunteers@stthomascamdenme.org</u>) if you would like additional information about these ministries.