

# TRINITY CATHEDRAL MEMBERSHIP FORM

## INSTRUCTIONS AND PRIVACY PLEDGE

This form should be completed by adult members 16 years and older. An asterisk (\*) indicates information we really need to complete your membership file. The rest of the form is optional but would be useful for the ministry staff as we seek to best serve your needs and build our community of faith.

Trinity Cathedral prints and distributes to the congregation an annual membership directory that explicitly prohibits use for personal, professional or business solicitation. We also maintain a postal and e-mail list of members that we use to facilitate communication. Our weekly e-mail newsletter is sent to a separate distribution list from which one may voluntarily subscribe or unsubscribe. The content of this membership form will be used in preparing the membership directory and in planning for ministry within the congregation. Trinity Cathedral will not distribute membership information to other organizations with the exception of those who allow their names and addresses to be given to the Diocese of Ohio for purposes of receiving the Diocesan newsletter, "Church Life."

\*Last Name: \_\_\_\_\_ \*First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

\*Title: (circle one) Mr. Mrs. Miss Ms. The Rev. Dr. None Other \_\_\_\_\_

Goes by name: \_\_\_\_\_

\*Address: \_\_\_\_\_

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

\_\_\_\_\_  
Zip code (+ 4 if known)

\*Home Phone: \_\_\_\_\_

Listed or Unlisted (circle one)

Cell Phone: \_\_\_\_\_

Listed or Unlisted (circle one)

Business Phone: \_\_\_\_\_

Listed or Unlisted (circle one)

\*You may give my name and address to the Diocese of Ohio for purposes of receiving the Diocesan newsletter, "Church Life"

(circle one) yes no

\*E-mail Address: \_\_\_\_\_

\*I would like to receive *This Week at Trinity*, the cathedral's weekly e-mail newsletter.

(circle one) yes no

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Religious background: \_\_\_\_\_

\*Baptized? (circle one) yes no

If yes, date and denomination: \_\_\_\_\_

\*Confirmed? (circle one)      yes                      no

If yes, date and denomination: \_\_\_\_\_

\*Received? (circle one)                      yes                      no

If yes, date and church: \_\_\_\_\_

Marital Status:              (circle one)    Married    Divorced    Single    Partnered    Widowed    Separated

If married, wedding date: \_\_\_\_\_

Name of spouse / significant other / partner: \_\_\_\_\_

*(If applicable)* Is this person joining Trinity at this time?

*(If applicable)* If no, should we invite them in the future? \_\_\_\_\_

Your Occupation: \_\_\_\_\_

Hobbies, passions, areas of interest, gifts, talents: \_\_\_\_\_

A little bit you would like us to know about you: \_\_\_\_\_

If you currently involved in any ministries at Trinity Cathedral, please list them:

Areas of interest, or ministries you would like to know more about at Trinity Cathedral:

Any other comments or questions that have not been covered: \_\_\_\_\_

Thank you so much for the opportunity for us to get to know you better!

Date completed \_\_\_\_\_