

# The Falls Church Parishioner Realm and membership update

Summer 2022

Please return this completed form to the parish office or via email to [ebangay@thefallschurch.org](mailto:ebangay@thefallschurch.org)

## Adult 1

Full Name:

Address:

Home phone number:

Cell phone number:

Email address:

Please provide as much information as you know and only answer if applicable

Birthdate	<input type="text" value="/"/>	<input type="text" value="/"/>	
Baptism date:	<input type="text" value="/"/>	<input type="text" value="/"/>	Baptism location: <input type="text"/>
Confirmation date:	<input type="text" value="/"/>	<input type="text" value="/"/>	Confirmation location: <input type="text"/>
Reception date:	<input type="text" value="/"/>	<input type="text" value="/"/>	Reception location: <input type="text"/>
Marriage date:	<input type="text" value="/"/>	<input type="text" value="/"/>	Marriage location: <input type="text"/>

Do you have Realm access?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If no, would you like a Realm invite to be sent to you?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you a member of The Falls Church?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If no, are you interested in becoming a member?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you receive enews?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If no, would you like to receive enews?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have a name badge?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If no, would you like a name badge?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

## Family Members

### Adult 2

Full Name:

Cell phone number:

Email address:

Please provide as much information as you know and only answer if applicable

Birthdate	<input type="text" value="/"/>	<input type="text" value="/"/>	
Baptism date:	<input type="text" value="/"/>	<input type="text" value="/"/>	Baptism location: <input type="text"/>
Confirmation date:	<input type="text" value="/"/>	<input type="text" value="/"/>	Confirmation location: <input type="text"/>

Reception date:  /  /  Reception location:

Do you have Realm access? Yes ☐ No ☐ If no, would you like a Realm invite to be sent to you? Yes ☐ No ☐

Are you a member of The Falls Church? Yes ☐ No ☐ If no, are you interested in becoming a member? Yes ☐ No ☐

Do you receive enews? Yes ☐ No ☐ If no, would you like to receive enews? Yes ☐ No ☐

Do you have a name badge? Yes ☐ No ☐ If no, would you like a name badge? Yes ☐ No ☐

### Child 1

Full name:

Birthdate  /  /

Baptism date:  /  /  Baptism location:

Confirmation date:  /  /  Confirmation location:

School:

School Grade in Sept 22:

### Child 2

Full name:

Birthdate  /  /

Baptism date:  /  /  Baptism location:

Confirmation date:  /  /  Confirmation location:

School:

School Grade in Sept 22:

### Child 3

Full name:

Birthdate  /  /

Baptism date:  /  /  Baptism location:

Confirmation date:  /  /  Confirmation location:

School:

School Grade in Sept 22:

If you have more than 3 children in your family, please fill out the children's sections of another form and return the forms together.