

Family

Spouse's | Partner's Name _____

Children's Name(s) _____

Dependent's Name(s) _____

Other _____

If your spouse or partner and / or children are members, you can fill out a form for each of them, otherwise please include their names above.

Commitment

While all guilds and ministries welcome new members, those marked with the symbol (*) need members currently and request your consideration. Please mark a check by each guild or ministry you are interested in joining:

Liturgical Guilds:

- Choir
- Counters
- Flower*
- Narthex*
- Readers & Intercessors
- Sanctuary*
- Servers

Ministries:

- Coffee Hour Hospitality*
- Holy Faith Library
- Mothers' Union
- Outreach Committee
- PAX Magazine
- Social Justice
- Women's Guild

Financial Support

We appreciate all support for the work and mission of St. James'. For more information about giving, please contact the office at: 604-685-2532 or office@stjames.bc.ca

St. James' Anglican Church Parish Membership Form

Welcome to St. James' Parish. All who attend the liturgy at St. James' Church are members of the Parish. (This includes the housebound who once attended the liturgy or who attend by Zoom.)

The information you provide will assist the Parish to better minister with you.

By completing this form, your contact information will form part of our database and appear on the Parish List, which is available to parish officers and employees only.

We handle and protect your personal information following the principles as outlined in the Personal Information Protection Act (PIPA).

Note: all Contact Information is required. The other information fields are optional.

Completed forms can be mailed to the Parish Office or returned by placing them in the offering plate

St. James' Anglican Church
303 East Cordova Street
Vancouver, BC V6A 1L4
T: 604-685-2532
E: office@stjames.bc.ca
W: www.stjames.bc.ca



St. James'
ANGLICAN CHURCH

Contact Information

Last Name _____

First Name _____

Middle Name(s) _____

Address _____

City _____

Province _____ Postal Code _____

Home Phone _____

Work Phone _____

Cell Phone _____

Email _____

Emergency Contact Name _____

Emergency Contact Phone Number _____

Parish communications are delivered through email and sometimes by Canada Post. Your address will not be shared or used for any other purpose.

Do you consent to us (the Parish - its officers and or employees) contacting you by email, Canada Post and or by telephone? **Yes** **No**

Your Signature

Dated: _____

If you do not have an email address, you can read the back section of the Mass booklets for news and announcements.

Would you like to receive *The Thurible* by email? Yes No

Would you like to receive the *Anglican Journal/Topic*? Yes No

Significant Dates (to celebrate the anniversaries of sacraments)

Date of Birth _____

Baptism: Yes No

If **Yes**, date _____

Confirmation: Yes No

If **Yes**, date _____

Reception: Yes No

If **Yes**, date _____

Married Partnered Other

If **Yes**, date _____

Date of membership at St. James' _____

Date of first visit to St. James' _____

Which liturgies of the Church do you regularly attend?

Sunday Low Mass

Sunday High Mass

Weekday Mass

Daily Offices

Work

Please check and include occupation status (past or present)

Working Retired Other

Occupation _____
