St. Andrew Presbyterian Church

New Member Information Form

Please complete the following information for the church record. With this information, we will log you and your family members into our church management system, St. Andrew Connect. You will receive an invite by email to St. Andrew Connect once the church office inputs this information. Included on this form is St. Andrew's photo release. Please read the policy below in italic and choose your photo release preference for each family member.

Family Information			
Family Last Name	Former Church	h	
Address			
City, State, Zip			
Home Phone			
our Information			
rst Name	Last Name	Birth Date (MM/DD/YYYY)	
bbile Phone Number	Email		
te and Place of Baptism (If not bap	otized, please leave blank)		
s this person been ordained as an	elder or deacon in the PCUSA? If so, w	where and when?	
for print, video or electronic in other published formats for St. be the sole property of St. And	pating in church activities my likeness and naging for use in promotional materials, n Andrew Presbyterian Church. I acknowle ew Presbyterian Church. St. Andrew will wed annually. St. Andrew agrees to make	news releases, social media, website and edge that the images and recordings will keep this document on record for a peri-	
You MAY publish my p	hotograph/voice. You MAY NC	OT publish my photograph/voice.	

Additional Family Member

First Name	Last Name	Birth Date (MM/DD/YYYY)
Mobile Phone Number	Email	
Date and Place of Baptism (If not b	aptized, please leave blank)	
Has this person been ordained as a	n elder or deacon in the PCUSA? If so,	where and when?
for print, video or electronic other published formats for S be the sole property of St. An	cipating in church activities my likeness an imaging for use in promotional materials, it. Andrew Presbyterian Church. I acknow drew Presbyterian Church. St. Andrew winiewed annually. St. Andrew agrees to make photograph/voice.	news releases, social media, website and pledge that the images and recordings will ll keep this document on record for a peri-
,	Last Namo	Righth Data (MM/DD/VVVV)
Additional Family Member First Name	Last Name	Birth Date (MM/DD/YYYY)
,	Last Name Email	Birth Date (MM/DD/YYYY)
First Name	Email	Birth Date (MM/DD/YYYY)
First Name Mobile Phone Number Date and Place of Baptism (If not b	Email	
First Name Mobile Phone Number Date and Place of Baptism (If not be that this person been ordained as a an a	Email aptized, please leave blank)	where and when? Ind voice may be photographed or recorded In news releases, social media, website and Iteledge that the images and recordings will Il keep this document on record for a peri-