

ST. PAUL'S EPISCOPAL CHURCH
VISITORS CARD

Name: _____

Spouse Name: _____

Address: _____

Hm Phone: _____ Cell Phone: _____

Email: _____

Married: Y/N Partner: Y/N

Names of Children:

1. _____ Birthday _____

2. _____ Birthday _____

3. _____ Birthday _____

4. _____ Birthday _____

Visiting for the first _____ second _____ third + time _____

Service attended: 8:00am _____ 10:00am _____

Denomination Background (*optional*)

Please check all that apply:

_____ Visiting (Home parish _____)

_____ Looking for a church home

_____ Would like more information about St. Paul's

_____ Would like a clergy **call** or **visit** (circle one or both)

Other comments or questions: _____

Please return this information to the church the next time you are here. You can leave the information with an usher or drop it off in the church office. We look forward to getting to know you.