



# CHRIST CHURCH OF THE ASCENSION

EPISCOPAL PARISH AND SCHOOL, PARADISE VALLEY

KNOW CHRIST, LOVE CHRIST, SERVE CHRIST

## CONTACT FORM

### HOUSEHOLD INFORMATION

Today's Date \_\_\_\_\_

Household Name(s) \_\_\_\_\_

Preferred Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Preferred Family Phone Number (or fill out individually below) \_\_\_\_\_

Preferred Family Email (or fill out individually below): \_\_\_\_\_

**Please let us know if the above information may be included in the Church Directory:**

Household Name(s)       Address       Phone       Email

**USE OF IMAGE – PLEASE READ CAREFULLY:** Unless you request otherwise, Christ Church reserves the right to exhibit and publish church-related photographs of you and your family members in internal and external communications including, but not limited to, the church newsletter, website, electronic communication, and social media. *Names will not be published with pictures without permission.* If you do not want your images used in these types of communications, please notify us in writing at [info@ccaaz.org](mailto:info@ccaaz.org).

**Adult 1** \_\_\_\_\_ Maiden Name \_\_\_\_\_  
(First) (Middle) (Last)

DOB: \_\_\_\_\_ E-mail \_\_\_\_\_ **Want to receive weekly E-Newsletter?**  Yes  No

Preferred phone # \_\_\_\_\_  Cell Phone  Landline

Baptism Date/Place \_\_\_\_\_ Confirmation Date/Place \_\_\_\_\_

**Please let us know if the following information may be included in the Church Directory:**

Name       Address       Phone       Email

**Have you submitted membership paperwork?**  Yes  No

**If no, would you like to become a member?**  Yes  No

Please indicate areas where you currently **Serve In Love** at Christ Church of the Ascension:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Acolytes                    | <input type="checkbox"/> Family Events              | <input type="checkbox"/> New Member Welcome     |
| <input type="checkbox"/> Adult Education Classes     | <input type="checkbox"/> Family Services            | <input type="checkbox"/> Pastoral Care          |
| <input type="checkbox"/> Altar Guild                 | <input type="checkbox"/> Flower Guild               | <input type="checkbox"/> Phoenix Rescue Mission |
| <input type="checkbox"/> Ascension Book & Gift Store | <input type="checkbox"/> Habitat for Humanity       | <input type="checkbox"/> Stewardship Ministry   |
| <input type="checkbox"/> Baptism/Confirmation        | <input type="checkbox"/> Healing Prayer Eucharist   | <input type="checkbox"/> Sunday Coffee Hour     |
| <input type="checkbox"/> Book Club                   | <input type="checkbox"/> Honduras Medical Missions  | <input type="checkbox"/> Sunday School          |
| <input type="checkbox"/> Building & Grounds          | <input type="checkbox"/> ICM Food/Clothing Bank     | <input type="checkbox"/> Usher                  |
| <input type="checkbox"/> Chalice Bearer              | <input type="checkbox"/> Infant & Toddler Childcare | <input type="checkbox"/> Vacation Bible School  |
| <input type="checkbox"/> Christ Church School        | <input type="checkbox"/> Knitting Ministry          | <input type="checkbox"/> Vestry                 |
| <input type="checkbox"/> Community of Hope           | <input type="checkbox"/> Lector                     | <input type="checkbox"/> Weddings               |
| <input type="checkbox"/> Daughters of the King       | <input type="checkbox"/> Memorial Garden            | <input type="checkbox"/> Women's Bible Study    |
| <input type="checkbox"/> Duet Help for Older Adults  | <input type="checkbox"/> Memorial Services          | <input type="checkbox"/> Worship Services       |
| <input type="checkbox"/> Education for Ministry      | <input type="checkbox"/> Men's Group                | <input type="checkbox"/> Youth Group            |
| <input type="checkbox"/> Evening Prayer              | <input type="checkbox"/> Music & Choir              | <input type="checkbox"/> _____                  |

(OVER)

**Adult 2** \_\_\_\_\_ Maiden Name \_\_\_\_\_  
(First) (Middle) (Last)

DOB: \_\_\_\_\_ E-mail \_\_\_\_\_ **Want to receive weekly E-Newsletter?**  Yes  No

Preferred phone # \_\_\_\_\_  Cell Phone  Landline

Baptism Date/Place \_\_\_\_\_ Confirmation Date/Place \_\_\_\_\_

**Please let us know if the following information may be included in the Church Directory:**

Name  Address  Phone  Email

**Have you submitted membership paperwork?**  Yes  No

**If no, would you like to become a member?**  Yes  No

Please indicate areas where you currently **Serve In Love** at Christ Church of the Ascension:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Acolytes                    | <input type="checkbox"/> Family Events              | <input type="checkbox"/> New Member Welcome     |
| <input type="checkbox"/> Adult Education Classes     | <input type="checkbox"/> Family Services            | <input type="checkbox"/> Pastoral Care          |
| <input type="checkbox"/> Altar Guild                 | <input type="checkbox"/> Flower Guild               | <input type="checkbox"/> Phoenix Rescue Mission |
| <input type="checkbox"/> Ascension Book & Gift Store | <input type="checkbox"/> Habitat for Humanity       | <input type="checkbox"/> Stewardship Ministry   |
| <input type="checkbox"/> Baptism/Confirmation        | <input type="checkbox"/> Healing Prayer Eucharist   | <input type="checkbox"/> Sunday Coffee Hour     |
| <input type="checkbox"/> Book Club                   | <input type="checkbox"/> Honduras Medical Missions  | <input type="checkbox"/> Sunday School          |
| <input type="checkbox"/> Building & Grounds          | <input type="checkbox"/> ICM Food/Clothing Bank     | <input type="checkbox"/> Usher                  |
| <input type="checkbox"/> Chalice Bearer              | <input type="checkbox"/> Infant & Toddler Childcare | <input type="checkbox"/> Vacation Bible School  |
| <input type="checkbox"/> Christ Church School        | <input type="checkbox"/> Knitting Ministry          | <input type="checkbox"/> Vestry                 |
| <input type="checkbox"/> Community of Hope           | <input type="checkbox"/> Lector                     | <input type="checkbox"/> Weddings               |
| <input type="checkbox"/> Daughters of the King       | <input type="checkbox"/> Memorial Garden            | <input type="checkbox"/> Women's Bible Study    |
| <input type="checkbox"/> Duet Help for Older Adults  | <input type="checkbox"/> Memorial Services          | <input type="checkbox"/> Worship Services       |
| <input type="checkbox"/> Education for Ministry      | <input type="checkbox"/> Men's Group                | <input type="checkbox"/> Youth Group            |
| <input type="checkbox"/> Evening Prayer              | <input type="checkbox"/> Music & Choir              | <input type="checkbox"/> _____                  |

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**Names of children:**

1. Full Name: \_\_\_\_\_ School Grade \_\_\_\_\_  
(First) (Middle) (Last)

DOB: \_\_\_\_\_ Baptism Date \_\_\_\_\_ Confirmation Date/Place \_\_\_\_\_

2. Full Name: \_\_\_\_\_ School Grade \_\_\_\_\_  
(First) (Middle) (Last)

DOB: \_\_\_\_\_ Baptism Date \_\_\_\_\_ Confirmation Date/Place \_\_\_\_\_

3. Full Name: \_\_\_\_\_ School Grade \_\_\_\_\_  
(First) (Middle) (Last)

DOB: \_\_\_\_\_ Baptism Date \_\_\_\_\_ Confirmation Date/Place \_\_\_\_\_

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Please list any information that will be helpful to the staff of Christ Church of the Ascension concerning special circumstances or requests involving your information. \_\_\_\_\_

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**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Please return this signed form to the church office, the CONTACT FORMS basket in the Narthex, or scan and email it to [info@ccaaz.org](mailto:info@ccaaz.org).