



2016 ST. SOPHIA CHURCH CHRISTIAN STEWARDSHIP—FAMILY PROFILE

440 Whitehall Road, Albany, New York 12208
(518) 489-4442 | Fax: (518) 489-0374

Office Use Only
Acct. # _____

SECTION A: CONFIDENTIAL PARISHIONER & FAMILY PROFILE INFORMATION

Head of Household: _____
Last Name First Name Initial

Head of Household - Orthodox.... Yes No Home Phone: _____ unlisted

Head of Household Occupation: _____ Work Phone: _____ unlisted

Date of Birth: _____ E-mail Address: _____
MM DD YYYY

Mailing Address: _____

City: _____ State: _____ Zip: _____

Alternate Mailing Address: Dates from: ___ / ___ to ___ / ___

Alternate Address: _____

City: _____ State: _____ Zip: _____

Spouse Name: _____
Last Name First Name Initial

Spouse Date of Birth: _____ Spouse Occupation: _____
MM DD YYYY

Spouse: Orthodox.... Yes No Work Phone: _____ unlisted

SECTION B: DEPENDENT / INDEPENDENT CHILDREN (SEE DEFINITION BELOW)

In the area below, please list all your children. Enter their birthdays as well as their status.
If any of your children are away at college, please list their address and we will send them a copy of the monthly Testament.

Name	Date of Birth (MM/DD/YYYY)	Orthodox (Y/N)	Dependent (Y/N)	School Name

Dependent Children: Persons age 18 or younger OR full-time college students up to age 25. These are persons listed as "TAX EXEMPTIONS" by parents to the IRS.

Independent Children: Persons age 18 and older, not attending school or college, regardless of where they reside.

Dated _____ Signature _____