

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE INITIAL: \_\_\_\_\_ TODAY'S DATE: \_\_/\_\_/\_\_

WHAT WOULD YOU PREFER TO BE CALLED? (NICKNAME): \_\_\_\_\_ MAIDEN NAME if it applies: \_\_\_\_\_

Revised 9/4/2007

MEMBERSHIP INFORMATION FORM

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OFFICE USE ONLY:

RECEIVED ON: \_\_/\_\_/\_\_

Received as members of Peace Lutheran Church on: \_\_/\_\_/\_\_ Membership registration # \_\_\_\_\_ Envelope # \_\_\_\_\_

By: Affirmation of Baptism\_\_ Transfer\_\_ Baptism\_\_ Restore to Membership\_\_

Letter of Transfer From: \_\_\_\_\_ Date Letter requested: \_\_/\_\_/\_\_ Date Letter Rec'd: \_\_\_\_\_

(Please Print)

Present Church Membership \_\_\_\_\_ Street Address (if not ELCA) \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Pastor's Name (if known) \_\_\_\_\_

DOB: \_\_/\_\_/\_\_ Where: \_\_\_\_\_ BAPTIZED: No Yes- DATE: \_\_/\_\_/\_\_ Where: \_\_\_\_\_

CONFIRMED: No Yes- DATE: \_\_/\_\_/\_\_ Where: \_\_\_\_\_ E.O./RACE\*: \_\_\_\_\_

MARITAL STATUS: (please circle) SINGLE MARRIED DIVORCED COMMITTED RELATIONSHIP WIDOWED

Wedding Date: \_\_/\_\_/\_\_ Where: \_\_\_\_\_

HOME STREET ADDRESS: \_\_\_\_\_ CITY/STATE/ZIP: \_\_\_\_\_

HOME PHONE: (\_\_\_\_) \_\_\_\_\_ CELLUAR/PAGER: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_

Is it okay to call you at work: YES NO SHIFT \_\_\_\_\_ WORK PHONE: (\_\_\_\_) \_\_\_\_\_

FAMILY MEMBERS:

PLEASE PROVIDE THE FOLLOWING IF YOUR SPOUSE/PARTNER (S/P) IS **NOT** JOINING OR IS ALREADY A MEMBER.

SPOUSE/PARTNER FIRST MIDDLE MAIDEN  
LAST NAME: \_\_\_\_\_ NAME: \_\_\_\_\_ INITIAL: \_\_\_\_\_ NAME if it applies: \_\_\_\_\_

DOB: \_\_/\_\_/\_\_ Where: \_\_\_\_\_ BAPTIZED: \_\_/\_\_/\_\_ Where: \_\_\_\_\_

CONFIRMATION: \_\_/\_\_/\_\_ Where: \_\_\_\_\_ E.O./RACE\*: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_ WORK PHONE:(\_\_\_\_) \_\_\_\_\_

Please note; Names, home address, home phone, and home e-mail will be published in our church directory unless otherwise requested. (DO NOT publish) \_\_\_\_\_

\* ETHNIC ORIGIN/RACE REQUESTED FOR ELCA STATISTICAL REPORT

PLEASE CONTINUE ON REVERSE

CHILD'S FULL NAME - INCLUDE LAST NAME IF DIFFERENT

(PLEASE PRINT)

(Please use an additional form for more children)

Do you want your youths' e-mail(s) published? Yes \_\_\_\_\_ No \_\_\_\_\_

1. \_\_\_\_\_ BIRTHDATE \_\_\_/\_\_\_/\_\_\_ WHERE \_\_\_\_\_ E-MAILS: \_\_\_\_\_  
 BAPTIZED \_\_\_/\_\_\_/\_\_\_ WHERE \_\_\_\_\_ FIRST COMMUNION \_\_\_/\_\_\_/\_\_\_ CONFIRMATION \_\_\_/\_\_\_/\_\_\_ DECEASED \_\_\_/\_\_\_/\_\_\_ E.O./RACE\* \_\_\_\_\_  
 SCHOOL ATTENDING NOW \_\_\_\_\_ GRADE \_\_\_\_\_ PROJECTED High School GRAD. YEAR \_\_\_\_\_

2. \_\_\_\_\_ BIRTHDATE \_\_\_/\_\_\_/\_\_\_ WHERE \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
 BAPTIZED \_\_\_/\_\_\_/\_\_\_ WHERE \_\_\_\_\_ FIRST COMMUNION \_\_\_/\_\_\_/\_\_\_ CONFIRMATION \_\_\_/\_\_\_/\_\_\_ DECEASED \_\_\_/\_\_\_/\_\_\_ E.O./RACE\* \_\_\_\_\_  
 SCHOOL ATTENDING NOW \_\_\_\_\_ GRADE \_\_\_\_\_ PROJECTED High School GRAD. YEAR \_\_\_\_\_

3. \_\_\_\_\_ BIRTHDATE \_\_\_/\_\_\_/\_\_\_ WHERE \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
 BAPTIZED \_\_\_/\_\_\_/\_\_\_ WHERE \_\_\_\_\_ FIRST COMMUNION \_\_\_/\_\_\_/\_\_\_ CONFIRMATION \_\_\_/\_\_\_/\_\_\_ DECEASED \_\_\_/\_\_\_/\_\_\_ E.O./RACE\* \_\_\_\_\_  
 SCHOOL ATTENDING NOW \_\_\_\_\_ GRADE \_\_\_\_\_ PROJECTED High School GRAD. YEAR \_\_\_\_\_

4. \_\_\_\_\_ BIRTHDATE \_\_\_/\_\_\_/\_\_\_ WHERE \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
 BAPTIZED \_\_\_/\_\_\_/\_\_\_ WHERE \_\_\_\_\_ FIRST COMMUNION \_\_\_/\_\_\_/\_\_\_ CONFIRMATION \_\_\_/\_\_\_/\_\_\_ DECEASED \_\_\_/\_\_\_/\_\_\_ E.O./RACE\* \_\_\_\_\_  
 SCHOOL ATTENDING NOW \_\_\_\_\_ GRADE \_\_\_\_\_ PROJECTED High School GRAD. YEAR \_\_\_\_\_

HOBBIES, SKILLS AND INTERESTS (list family members separately):

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HOW WOULD YOU LIKE TO SERVE AT PEACE?

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DIRECTIONS TO OUR HOUSE:

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ADDITIONAL INFORMATION:

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