

Family last name: \_\_\_\_\_ Home phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Address of residence (if different than above): \_\_\_\_\_

Seasonal residence (address and phone): \_\_\_\_\_

Family email address: \_\_\_\_\_

Adult family members: (List additional on back.)

1. First name and middle initial \_\_\_\_\_ Preferred name \_\_\_\_\_

Birth date \_\_\_\_\_ Marital status (S, M, W, D) \_\_\_\_\_

Wedding date \_\_\_\_\_ Baptized (yes/no) \_\_\_\_\_

Cell phone \_\_\_\_\_ Email \_\_\_\_\_

Date and place of Baptism \_\_\_\_\_

Date and place of Confirmation \_\_\_\_\_

Previous church positions held \_\_\_\_\_

2. First name and middle initial \_\_\_\_\_ Preferred name \_\_\_\_\_

Birth date \_\_\_\_\_ Marital status (S, M, W, D) \_\_\_\_\_

Wedding date \_\_\_\_\_ Baptized (yes/no) \_\_\_\_\_

Cell phone \_\_\_\_\_ Email \_\_\_\_\_

Date and place of Baptism \_\_\_\_\_

Date and place of Confirmation \_\_\_\_\_

Previous church positions held \_\_\_\_\_

Children living in the home: (List additional on back.)      School name and grade      Date and place of Baptism

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List which family members are joining the church. If transferring, please indicate the name and mailing address of the church so we may request the transfer. If not transferring, you will be received by profession of faith.

Member name      Transfer (T) or Profession of Faith (P)      Former Church - Church mailing address/zip

Circle as appropriate

\_\_\_\_\_ T / P \_\_\_\_\_

\_\_\_\_\_ T / P \_\_\_\_\_

\_\_\_\_\_ T / P \_\_\_\_\_

\_\_\_\_\_ T / P \_\_\_\_\_

\_\_\_\_\_ T / P \_\_\_\_\_

**Please complete the reverse side.**

Employment of family members:

Member name

Field of employment

Current/Last

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name, address and telephone number of emergency contacts:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Names of children not living in your household:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Any other information that you feel would be useful or of interest such as hobbies, special skills, personal interests:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Service time I wish to join into membership at Church of the Palms:

☐ 5:30 p.m. Saturday

☐ 8:30 a.m. Sunday

☐ 11 a.m. Sunday

OFFICE USE ONLY:

Date Received into membership: \_\_\_\_\_

Date info entered into computer: \_\_\_\_\_

Date Transfer request sent: \_\_\_\_\_

By Whom: \_\_\_\_\_

Date Transfer Certificate received: \_\_\_\_\_

*revised Aug. 2018*