

## Database Information Sheet

Please fill out one form per adult in household

(Drafin)	(First)	(Middle)	(1.22	+>	(Cuffix)	
(Prefix)	(First)	(Middle)	(Las	t)	(Suffix)	
Address:						
(Number & Stre	et)	(City)		(State)	(Zip Code)	
Email Address:						
Cell Phone:	Phone: Home Phone:					
Birthdate:						
Single Mar	ried Divorc	ed Widowed	Separated	_ Domestic P	artnership	
Gender: Male	Female	Prefer not to answer_				
Present Church	Status: Member	Attender Fri	iend Visito	r Other		
Baptized: Yes _	Date:	No				
Children:						
Full Name		Birth Date	Grade	Baptized?	Confirmed?	
					<u> </u>	
		_				
Other adults livi	ng at home—rela	itionship to you:				
	_	, .				
Occupation:		Employe	er:			
	dua aa.					
Work Email Add	aress:					