

Grace Lutheran Church and School Membership Registration

Family Last Name _____

Address _____
Street

City State Zip Cell Telephone _____

Home Telephone (____) _____ Household E-Mail _____

PRIMARY CONTACT (Mr. Mrs. Ms) _____
First Middle Last Maiden (If applicable)

Employer _____ Title/Occupation _____

Work Phone (____) _____ Personal e-mail _____

Emergency Contact other than spouse: _____
Name Relationship Phone number

Birth Date ____/____/____ Date Married (if app.) ____/____/____ Single Divorced Widow/er

Baptism Date ____/____/____ Church and City _____

Confirmation Date ____/____/____ Church and City _____

What was your previous church? _____
Church City State

How long has it been since you've regularly attended your previous church? *Less than a year*
 One to three years *More than three years* *I have not regularly attended a church previously*

If you are a member of another church and are joining at this time, please contact the church and ask that they transfer or release you

SPOUSE OR

SECONDARY CONTACT (Mr. Mrs Ms) _____
First Middle Last Maiden (If applicable)

Employer _____ Title/Occupation _____

Work Phone (____) _____ Personal E-mail _____

Birth Date ____/____/____ Cell Telephone _____

Baptism Date ____/____/____ Church and City _____

Confirmation Date ____/____/____ Church and City _____

What was your previous church? _____
Church City State

How long has it been since you've regularly attended your previous church? *Less than a year*
 One to three years *More than three years* *I have not regularly attended a church previously*

Is your spouse considering membership? yes no I don't have a spouse

Worship Service you typically attend: Sat. 7 pm Sun. 10 am

What brought you to Grace Lutheran?

CHILDREN

Child 1 _____ Birth Date ____/____/____
First Middle Last
Baptism Date ____/____/____ Church and City _____
Confirmation Date ____/____/____ Church and City _____
Grade in School _____

Child 2 _____ Birth Date ____/____/____
First Middle Last
Baptism Date ____/____/____ Church and City _____
Confirmation Date ____/____/____ Church and City _____
Grade in School _____

Child 3 _____ Birth Date ____/____/____
First Middle Last
Baptism Date ____/____/____ Church and City _____
Confirmation Date ____/____/____ Church and City _____
Grade in School _____

Child 4 _____ Birth Date ____/____/____
First Middle Last
Baptism Date ____/____/____ Church and City _____
Confirmation Date ____/____/____ Church and City _____
Grade in School _____

Please list any adult children not living at home

1. Name _____ Phone () _____
Address _____

2. Name _____ Phone () _____
Address _____

Occasionally, Grace Lutheran publishes names, addresses, phone numbers, email addresses, and photographs of church members and/or visitors in the church newsletter, info bulletin, directory, and other forms of church publications. We also may send emails to members who have provided their email addresses and publish names and photos on the web site. We assume that we have your permission to do this. If you do NOT want us to use your personal information in this way, please provide a letter to Teri Morgan, Church Secretary.