



New Member Information: Some OR all of the information on this form will be entered into our permanent Church Record. Please fill out as completely as possible.

Present Church Membership (if any) _____

ADULT

FULL NAME _____
(last) (first) (middle) (maiden)

STREET ADDRESS _____

CITY / STATE / ZIP _____

HOME PHONE # _____ CELL PHONE # _____

EMAIL _____ Would you like the newsletter by email? YES NO

Please enter dates as completely as possible:

(Birthdate) (Baptism) (Confirmation) (Marriage)

ADULT

FULL NAME _____
(last) (first) (middle) (maiden)

STREET ADDRESS _____

CITY / STATE / ZIP _____

HOME PHONE # _____ CELL PHONE # _____

EMAIL _____ Would you like the newsletter by email? YES NO

Please enter dates as completely as possible:

(Birthdate) (Baptism) (Confirmation) (Marriage)

Please List Dependent Children Living at Home & Joining First Lutheran Church With You

FULL NAME _____
(last) (first) (middle)

BIRTHDATE & PLACE _____

BAPTISMAL DATE & PLACE _____

CONFIRMATION DATE & PLACE _____

CURRENT GRADE IN SCHOOL _____

FULL NAME _____
(last) (first) (middle)

BIRTHDATE & PLACE _____

BAPTISMAL DATE & PLACE _____

CONFIRMATION DATE & PLACE _____

CURRENT GRADE IN SCHOOL _____

FULL NAME _____
(last) (first) (middle)

BIRTHDATE & PLACE _____

BAPTISMAL DATE & PLACE _____

CONFIRMATION DATE & PLACE _____

CURRENT GRADE IN SCHOOL _____

FULL NAME _____
(last) (first) (middle)

BIRTHDATE & PLACE _____

BAPTISMAL DATE & PLACE _____

CONFIRMATION DATE & PLACE _____

CURRENT GRADE IN SCHOOL _____