

# NEW MEMBER INFORMATION

Date completed \_\_\_\_\_

Name \_\_\_\_\_  
(as you wish recorded in church records)

Mailing Address \_\_\_\_\_

Phone number:

Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Email address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Baptized  Yes  No Date (if known) \_\_\_\_\_

Marital status \_\_\_\_\_

If married, name of spouse \_\_\_\_\_

Anniversary date \_\_\_\_\_

Children living at home

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of Baptism \_\_\_\_\_  
(if known)

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of Baptism \_\_\_\_\_  
(if known)

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of Baptism \_\_\_\_\_  
(if known)

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Date of Baptism \_\_\_\_\_  
(if known)

Church transferring from (if applicable) \_\_\_\_\_

Date and service joining St. Luke United Methodist Church:

Date \_\_\_\_\_

Saturday at 5:30pm \_\_\_\_\_

Sunday at 8:30am \_\_\_\_\_ 10:30am \_\_\_\_\_