

New Member Household Information

Date:

Address: _____

ADULT(S)

X _____ , _____ , _____ , _____
First Name Nickname Middle Last

_____ , _____ , _____
Cell e-mail Workplace

Birthdate ____/____/____ Location _____

Baptism Y/N Date ____/____/____ Church / Location _____

Confirmed Y/N Date ____/____/____ Church / Location _____

X _____ , _____ , _____ , _____
First Name Nickname Middle Last

_____ , _____ , _____
Cell e-mail Workplace

Birthdate ____/____/____ Location _____

Baptism Y/N Date ____/____/____ Church / Location _____

Confirmed Y/N Date ____/____/____ Church / Location _____

If Married: Maiden Name: _____

Wedding ____/____/____ Church / Location _____

CHILDREN IN THE HOME

X _____ , _____ , _____ , _____
First Name Nickname Middle Last

Boy ____ Girl ____ , _____ , _____
Grade Cell e-mail

Birthdate ____/____/____ Location _____

Baptism Y/N Date ____/____/____ Church / Location _____

Confirmed Y/N Date ____/____/____ Church / Location _____

X _____ , _____ , _____ , _____
First Name Nickname Middle Last

Boy ____ Girl ____ , _____ , _____
Grade Cell e-mail

Birthdate ____/____/____ Location _____

Baptism Y/N Date ____/____/____ Church / Location _____

Confirmed Y/N Date ____/____/____ Church / Location _____

X _____ , _____ , _____ , _____
First Name Nickname Middle Last

Boy ____ Girl ____ , _____ , _____
Grade Cell e-mail

Birthdate ____/____/____ Location _____

Baptism Y/N Date ____/____/____ Church / Location _____

Confirmed Y/N Date ____/____/____ Church / Location _____

FAMILY INFORMATION:

Our family's interests and activities:

What brought you to Detroit Lakes and/or First Lutheran Church?

Tell us about some of your gifts & passions:

With what ministries might you be comfortable helping? Please check all that apply.

- Usher Read the Lesson Audio/Visual Tech. Sunday School
- Greeter Serve Communion Prepare Communion (Altar Guild) Youth Group
- Worship Team Singer and/or Musician Special Music Funeral Server

Being Welcomed which service: (circle one) **Sunday 8:30 10:45** **Wednesday 6:00**
 or summer services **Sunday 8:30 10:30**

Preference for sponsor: _____

Current membership information

_____ I / we do not have membership established with any other congregation

_____ I / we current have membership at _____

Please indicate if there are individual memberships within different congregations:

Request for transfer to be made by: _____ Individual _____ Church staff