

# Faith Lutheran Church Membership Information

*(This information is needed to help serve you better. It will not be given or sold to others.)*

## Household Information

Please fill out once per household.

Primary Last Name \_\_\_\_\_

Street Address \_\_\_\_\_, Apt. or P.O. Box. \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_

## Individual Information

Please fill out for each individual. Include last names if other than primary household.

Name: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Maiden Name \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

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

School now attending if student \_\_\_\_\_

Current Grade or, if not full time student, highest grade-level completed \_\_\_\_\_

Gender: M / F

Birth date (M/D/Y) \_\_\_\_\_ Where? (City,State) \_\_\_\_\_

Baptism Date (M/D/Y) \_\_\_\_\_ Where? (City,State) \_\_\_\_\_

Baptized at \_\_\_\_\_ FLC \_\_\_\_\_ Other Lutheran Church \_\_\_\_\_ Non-Lutheran Church

Now receiving communion? Y / N Date of First Communion (M/D/Y) \_\_\_\_\_

Confirmation date (M/D/Y) \_\_\_\_\_ Where confirmed (City,State) \_\_\_\_\_

Confirmed at \_\_\_\_\_ FLC \_\_\_\_\_ Other Lutheran Church \_\_\_\_\_ Non-Lutheran Church

Faith Lutheran Church Membership date (M/D/Y) \_\_\_\_\_

Received by? \_\_\_\_\_ Baptism \_\_\_\_\_ Affirmation of Faith or \_\_\_\_\_ Transfer from: \_\_\_\_\_  
\_\_\_\_\_, which is a: \_\_\_\_\_ ELCA Lutheran \_\_\_\_\_ Other Lutheran \_\_\_\_\_ Non-Lutheran church

Marital Status \_\_\_\_\_ Married (M/D/Y: \_\_\_\_\_)  
\_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Widowed/Widower