

# Church Member Information

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First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Marital Status: \_\_\_\_\_

First Name of Spouse: \_\_\_\_\_

Last Name of Spouse: \_\_\_\_\_

Spouse's DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Email Addresses:

\_\_\_\_\_

\_\_\_\_\_

Wedding Anniversary: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Any family in St. Paul's? \_\_\_\_\_

## Children Information

Provide the names and birthdays if they attend church with you & live in the same household.

Full Name: \_\_\_\_\_

Male     Female

DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Full Name: \_\_\_\_\_

Male     Female

DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Full Name: \_\_\_\_\_

Male     Female

DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Full Name: \_\_\_\_\_

Male     Female

DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## Previous Church Details

Information of your previous church for transfer purposes. If no other church, then make a note for us.

Church Name and Address:

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Pastor: \_\_\_\_\_

Were you a Member at this church?  Yes  No

If yes, please give dates: From: \_\_\_\_\_ To: \_\_\_\_\_

## Baptism & Confirmation Information

If you, your spouse, or your children have been baptised or confirmed, please let us know for our records.

Name: \_\_\_\_\_

Have you been baptized?  Yes  No

Have you ever been Confirmed?  Yes  No

If yes, Date of Baptism: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

If yes, Date of Confirmation: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name: \_\_\_\_\_

Have you been baptized?  Yes  No

Have you ever been Confirmed?  Yes  No

If yes, Date of Baptism: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

If yes, Date of Confirmation: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name: \_\_\_\_\_

Have you been baptized?  Yes  No

Have you ever been Confirmed?  Yes  No

If yes, Date of Baptism: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

If yes, Date of Confirmation: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name: \_\_\_\_\_

Have you been baptized?  Yes  No

Have you ever been Confirmed?  Yes  No

If yes, Date of Baptism: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

If yes, Date of Confirmation: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name: \_\_\_\_\_

Have you been baptized?  Yes  No

Have you ever been Confirmed?  Yes  No

If yes, Date of Baptism: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

If yes, Date of Confirmation: \_\_\_\_ / \_\_\_\_ / \_\_\_\_