



QR Code to Access Form Electronically

Membership Data Form

All church members, please complete data requested below for updating and verifying our membership data base.

Last Name:

Your First Name:

Birthday: (Month & Day)

Spouse First Name: (If Applicable)

Birthday: (Month & Day)

Member: (Yes/No)

Wedding Anniversary: (Month & Day)
(If Applicable)

Street Address:

City:

Zip Code:

Home Contact Number:

Mobile Contact Number (His):

Mobile Contact Number (Her's):

Email Address (His):

Email Address (Her's):

Household/Children: (If Applicable)

Last/First Name:

Birthday: (Month & Day)

Last/First Name:

Birthday: (Month & Day)

Last/First Name:

Birthday: (Month & Day)

Last/First Name:

Birthday: (Month & Day)

New Church Membership Directory:

Will you participate in the New Photo Directory? Yes No

New Church Membership Directory Option (Select One):

Physical Copy Electronic Copy Both

One Call Now:

Are you enrolled in our One Call Now Notification System? Yes No
"One Call Now" • Receive the church bulletin & notifications.

If not, would you like to be enrolled? Yes No