

# Church Membership Registration Form

Please print and complete this form to register as a member of our church congregation.

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## Personal Information

Full Name:

Date of Birth:

Gender:

Marital Status:

## Contact Information

Street Address:

City, State, Zip:

Phone Number:

Email Address:

## Family Information

Spouse's Name (if applicable):

Children's Names & Ages:

## Spiritual Journey & Church History

Have you been baptized? (Yes/No):

Approximate Date of Baptism:

Previous Church Affiliation (Name & City):

Reasons for Seeking Membership:

## Emergency Contact

Contact Person Name:

Relationship to Member:

Contact Phone Number:

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Applicant Signature:  Date: