New Member Information Form

Name:			
Name:last		first	middle
Home E-mail:			
Work E-mail:			
Date of Birth:		Place of Birth:	Town, State
			Town, State
Baptism Date:		Confirmation Da	te:
From: ELCA □	other Lutheran	Church□	non Lutheran Church
Received as: Baptized		Confirmed □	
Name:last			
last	first		middle
Home E-mail:			
			Town, State
			Town, State
Baptism Date:		Confirmation Da	te:
		~ .	
From: ELCA	other Lutheran	Church⊔	non Lutheran Church □
Received as: Baptized		Confirmed □	
G ()			
Sponsor(s):			
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Office use only			
Reception Date:		Certificate member(·
Register □# Church Windows □		Certificate Sponsor(s) 🛘
Church windows		Financial Sec. \square	

Address:		
Home Phone:		
Marriage date:		
<u>dren</u>		
Name:		M / F
Date of Birth:	Date of Baptism:	
Grade:		
Date of Birth:	Date of Baptism:	
Grade:		
Date of Birth:	Date of Baptism:	
Grade:		
Transferred from:		
Other info		