

# Community of Faith Membership Update Form

Date Prepared \_\_\_\_\_

## PERTAINING TO THE HEAD OF HOUSEHOLD

Dr. \_\_\_ Mr. \_\_\_ Mrs. \_\_\_ Name: \_\_\_\_\_

Ms. \_\_\_ Miss \_\_\_ ( ) \_\_\_ (Last) (First) (M.I.) (Nickname)

Street Address: \_\_\_\_\_ Date Joined Community of Faith: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: (H): \_\_\_\_\_ (W): \_\_\_\_\_ (C): \_\_\_\_\_

Male \_\_\_ Female \_\_\_ Birth Date: \_\_\_/\_\_\_/\_\_\_ Baptized? Yes \_\_\_ No \_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Confirmed Lutheran? Yes \_\_\_ No \_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Single \_\_\_ Engaged \_\_\_ Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Widowed \_\_\_

## PERTAINING TO THE SPOUSE OR RELATIVE LIVING WITH YOU

Dr. \_\_\_ Mr. \_\_\_ Mrs. \_\_\_ Name: \_\_\_\_\_

Ms. \_\_\_ Miss \_\_\_ ( ) \_\_\_ (Last) (First) (M.I.) (Nickname)

Street Address: \_\_\_\_\_ Date Joined Community of Faith: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: (H): \_\_\_\_\_ (W): \_\_\_\_\_ (C): \_\_\_\_\_

Male \_\_\_ Female \_\_\_ Birth Date: \_\_\_/\_\_\_/\_\_\_ Baptized? Yes \_\_\_ No \_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Confirmed Lutheran? Yes \_\_\_ No \_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Single \_\_\_ Engaged \_\_\_ Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Widowed \_\_\_

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Previous Church Membership at:  
\_\_\_\_\_

Pastor \_\_\_\_\_ Address \_\_\_\_\_  
\_\_\_\_\_

Transfer sent? \_\_\_\_\_ Do you want this church office to send for transfer? \_\_\_\_\_

**\*\*Have you signed the Community of Faith "Statement of Faith"? Yes \_\_\_ No \_\_\_**

## **PERTAINING TO CHILDREN LIVING AT HOME**

1. Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_ Nickname \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Gender: Male\_\_\_ Female\_\_\_ Child: Son\_\_\_ Daughter\_\_\_

Baptized? Yes\_\_\_ No\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Confirmed Lutheran? Yes\_\_\_ No\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

2. Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_ Nickname \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Gender: Male\_\_\_ Female\_\_\_ Child: Son\_\_\_ Daughter\_\_\_

Baptized? Yes\_\_\_ No\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Confirmed Lutheran? Yes\_\_\_ No\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

3. Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_ Nickname \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Gender: Male\_\_\_ Female\_\_\_ Child: Son\_\_\_ Daughter\_\_\_

Baptized? Yes\_\_\_ No\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Confirmed Lutheran? Yes\_\_\_ No\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

4. Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_ Nickname \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Gender: Male\_\_\_ Female\_\_\_ Child: Son\_\_\_ Daughter\_\_\_

Baptized? Yes\_\_\_ No\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Confirmed Lutheran? Yes\_\_\_ No\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_