



LUTHERAN CHURCH OF THE RESURRECTION

NEW MEMBER INFORMATION FORM

Household Name _____

Household Address (Street) _____

(City) _____ (State) _____ (Zip) _____ (Home No.) _____

Adult Name _____

E-Mail Address _____ (Cell No.) _____

Birth Date & Place _____

Baptism Date & Place _____

Confirmation date & Place _____

Marriage Date & Place _____

Occupation/Employer _____

Hobbies/Talents/Interests _____

How long have been in Racine/Where did you move from _____

Anything else you would like to share with _____

I wish to be received into the church by:

___ Transfer from _____

___ Affirmation of Faith ___ Baptism ___ Reinstatement ___ Confirmation

Adult Name _____

E-Mail Address _____ (Cell No.) _____

Birth Date & Place _____

Baptism Date & Place _____

Confirmation date & Place _____

Marriage Date & Place _____

Occupation/Employer _____

Hobbies/Talents/Interests _____

How long have been in Racine/Where did you move from _____

Anything else you would like to share with _____

I wish to be received into the church by:

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___ Affirmation of Faith ___ Baptism ___ Reinstatement ___ Confirmation

****PLEASE TURN OVER TO COMPLETE FURTHER FAMILY INFORMATION****

NAMES OF CHILDREN JOINING THE CHURCH

Child's Name _____
E-Mail Address _____
Birth Date & Place _____
Baptism Date & Place _____
Confirmation Date & Place _____
Grade in School _____

I wish to be received into the church by:

___ Transfer from _____
___ Affirmation of Faith ___ Baptism ___ Reinstatement ___ Confirmation

Child's Name _____
E-Mail Address _____
Birth Date & Place _____
Baptism Date & Place _____
Confirmation Date & Place _____
Grade in School _____

I wish to be received into the church by:

___ Transfer from _____
___ Affirmation of Faith ___ Baptism ___ Reinstatement ___ Confirmation

Child's Name _____
E-Mail Address _____
Birth Date & Place _____
Baptism Date & Place _____
Confirmation Date & Place _____
Grade in School _____

I wish to be received into the church by:

___ Transfer from _____
___ Affirmation of Faith ___ Baptism ___ Reinstatement ___ Confirmation

Child's Name _____
E-Mail Address _____
Birth Date & Place _____
Baptism Date & Place _____
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___ Affirmation of Faith ___ Baptism ___ Reinstatement ___ Confirmation