**Name (first, middle, last):**

**Preferred Name: Maiden Name:**

**Preferred Pronouns: She/her/hers:\_\_\_ He/him/his:\_\_\_\_They/them:\_\_\_\_\_Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: City: State: Zip Code:**

**Phone: (H) (C) \_\_\_\_\_\_\_\_\_\_\_ Unlisted (Circle one): Y N**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_ Unlisted (Circle one): Y N**

**Birthdate: Baptism Date: Confirmation Date:**

**Marital Status: If Married, Anniversary:**

**Occupation:**

**List any hobbies/skills:**

**List any past church volunteer experience:**

**Spouse/Partner**

**Name (first, middle, last):**

**Preferred Name: Maiden Name:**

**Preferred Pronouns: She/her/hers:\_\_\_ He/him/his:\_\_\_\_They/them:\_\_\_\_\_Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: (H) (C) Email Address:**

**Birthdate: Baptism Date: Confirmation Date:**

**Occupation:**

**List any hobbies/skills:**

**List any past church volunteer experience:**

**Children**

**Name: Preferred Name:**

**Sex:** \_\_ Male \_\_ Female\_\_Non-Binary **Grade: Lives at home:** \_\_ Yes \_\_ No

**Birthdate: Baptism Date: Confirmation Date:**

**Name: Preferred Name:**

**Sex:** \_\_ Male \_\_ Female\_\_Non-Binary **Grade: Lives at home:** \_\_ Yes \_\_ No

**Birthdate: Baptism Date: Confirmation Date:**

**Name: Preferred Name:**

**Sex:** \_\_ Male \_\_ Female\_\_\_Non-Binary **Grade: Lives at home:** \_\_ Yes \_\_ No

**Birthdate: Baptism Date: Confirmation Date:**

**Name: Preferred Name:**

**Sex:** \_\_ Male \_\_ Female­­­­\_\_Non-Binary **Grade: Lives at home:** \_\_ Yes \_\_ No

**Birthdate: Baptism Date: Confirmation Date:**

**Name: Preferred Name:**

**Sex:** \_\_ Male \_\_ Female\_\_\_No-Binary **Grade: Lives at home:** \_\_ Yes \_\_ No

**Birthdate: Baptism Date: Confirmation Date:**

**Emergency Contact:**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship:­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­**

**Mobile phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other phone:­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**--------------------------------------- For Office Use ---------------------------------------**

**Date of Membership:**

**Envelope Number:**