Attach Picture Here

FIRST PRESBYTERIAN CHURCH NEW MEMBER FORM

2005 COMMUNICANT CLASS

Name: _____ **Date:** _____
First Middle Last

Male: ☐ **Female:** ☐ **Date of Birth**_____**School**_____**Grade**_____

Residence Address: _____
Street *Apt. #* *City* *State* *Zip*

Mailing Address (if different): _____ **E-mail: (OPTIONAL)**_____

FAMILY MEMBERS LIVING WITH YOU	RELATIONSHIP	HOME PHONE #	WORK PHONE #

(*Use back if more than four)*)

Friends call me: _____

Have you been baptized? ☐ yes ☐ no **Date and Place** _____

Are you presently attending a Sunday School class at FPC? ☐ yes ☐ no Class Name:_____

Interests or Hobbies: _____

Areas of Service Where I Would Like to Help:

☐ *Churchtime* ☐ *Vacation Bible School* ☐ *Playing Piano or Guitar* ☐ *Visiting Shut-In* ☐ *Grounds*

Is there anything unique about you or your family that we need to know that would help us minister to you?

Do not write below this line

Joining as: ☐ MEMBER ☐ ASSOCIATE MEMBER
Joining on: ☐ Profession ☐ Restatement ☐ Letter

INTERVIEWERS: _____

_____