

SUGAR CREEK PRESBYTERIAN CHURCH (USA)

Adult New Member Information Form

Name: _____
Title Last First Middle Preferred First Name

Address: _____
Street Address City State Zip

Alternate Address: _____
Street Address City State Zip
Dates for Alternate Address: _____

Phone: _____
Home Work Cell Other

E-mail: _____
If more than one, please indicate preferred

Date of Birth: ___/___/_____ Sex: Male Female

Have you been baptized? Yes No If yes, date of baptism: ___/___/_____

Marital status: Single Married Divorced Widowed

Marriage Date: ___/___/_____ Spouse Name: _____

If widowed, date spouse deceased: ___/___/_____ If married, maiden name: _____

Ethnic Origin: Caucasian Asian Black Hispanic Native American

Occupation: _____ Employer: _____

Disabilities: Hearing Vision Other (Please specify) _____

Are you an ordained Ruling Elder? Yes No Are you an ordained Deacon? Yes No

Current church membership and address: _____

The bottom portion of this form is designed to create a quick biography of you, Sugar Creek's new member. Please share with us as much information as you would like, such as hometown, grown children, grandchildren, interests, hobbies, or activities that you enjoy. Also, please list any activities in which you have participated at another church. Please feel free to use the back!

For Pastor's/Clerk's Use:

_____ Profession of Faith

_____ Baptism

_____ Re-affirmation

_____ Letter of Transfer from _____

Date Received by Session ___/___/_____

Membership Number: _____