

NEW HOPE LUTHERAN CHURCH – HUDSONVILLE, MI

Membership Information

Personal Information

Title: Mr. Mrs. Mr. & Mrs. Ms. Miss Other: _____

Name _____
(first) (middle) (last) (maiden)

Birth Date: ___ - ___ - ___ Location: _____ Baptism Date: ___ - ___ - ___ Location: _____

Name _____
(first) (middle) (last) (maiden)

Birth Date: ___ - ___ - ___ Location: _____ Baptism Date: ___ - ___ - ___ Location: _____

Street Address _____

City, State, Zip _____

Home Phone () _____ - _____ Cell #'s () _____ - _____, () _____ - _____

E-Mail Addresses _____, _____

Family Information

Marital Status: Never Married Married Separated Divorced Remarried Widowed

Date of Marriage _____ - _____ - _____ Location: _____

If this is not your first marriage, date of termination of previous marriage(s) _____ - _____ - _____

If you are widowed, date of spouse's death: _____ - _____ - _____

Place of Burial: _____

Names and Birth Dates of Children

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Occupation

Job Title: _____

Employer: _____

Work # _____ - _____ - _____

Job Title: _____

Employer: _____

Work # _____ - _____ - _____

Miscellaneous Information

Military Experience: _____

Church Background: _____

Funeral Instructions: _____

Other Personal Or Family Considerations You Would Like The Pastor & Elders To Know About:

People To Contact In Exceptional Circumstances:

Name: _____

Relationship: _____

Phone: _____ - _____ - _____

Name: _____

Relationship: _____

Phone: _____ - _____ - _____