



Nativity Lutheran Church

Adult Membership Form

Please complete one copy of this form for each adult in your household becoming a member.

Today's Date: ____/____/____

Please print your proper First, Middle, Last (and maiden name if applicable)

Male: Female:

First Middle Last Maiden (if applicable)

First Name (as you like to be addressed): _____

Address: _____

City/State/Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

(Please mark the preferred phone number with an asterisk *.)

E-mail: _____

BIRTH DATE:

Date of Birth: ____/____/____

Place of Birth: _____ (Town/City) _____ (State)

MARITAL STATUS: (CHECK ONE)

Single Partnered or Married Name of Partner/Spouse: _____

Wedding date & year (optional): _____

Widowed Name of Deceased: _____

Date of his/her death (M/D/Y): _____

NAMES & BIRTHDATES OF CHILDREN: (PLEASE IDENTIFY DECEASED CHILDREN BY CHECKING THE BOX)

Full Name Birth date (M/D/Y) Deceased?

Full Name Birth date (M/D/Y) Deceased?

Full Name Birth date (M/D/Y) Deceased?

Full Name Birth date (M/D/Y) Deceased?

Official Date of Membership: _____
(Office Use Only)

ETHNIC IDENTIFICATION: (THIS ALLOWS OUR DENOMINATION TO MONITOR REPRESENTATION FROM VARIOUS ETHNIC GROUPS)

African American/Black Arab/Middle Easter Multiethnic
 African National/African-Caribbean Asian/Pacific Islander White/Caucasian
 American Indian/Alaska Native Latino/Hispanic Other _____

BAPTISM INFORMATION: (CHECK ONE)

I have never been baptized.
 I was baptized. (Please provide as much of the following baptism information as you are able.)
Date of Baptism (M/D/Y): _____ / _____ / _____
Congregation baptized in: _____

(Town/City) (State)

Please provide as much of the following information as you are able. We realize that many do not come from faith traditions that celebrate these religious milestones.

FIRST COMMUNION: (IF APPLICABLE & INFO IS AVAILABLE) Congregation: _____ Year: _____
CONFIRMATION: (IF APPLICABLE & INFO IS AVAILABLE) Congregation: _____ Year: _____

CHURCH MEMBERSHIP: (CHECK ONE)

I do not currently identify myself as a member of another church.
 I identify myself as a member of another church and will maintain membership there and Nativity too.
 I am leaving another church and would like assistance in **transferring** my membership to Nativity.
(Complete the portion below **only** if you are transferring membership from another church.)
Church: _____
Address/City/State/Zip: _____

VOCATIONAL INFORMATION:

Occupation: _____
Employer: _____
Additional position(s)
Occupation: _____
Employer: _____

MILITARY STATUS: (CHECK ONE IF APPLICABLE)

Active Duty Reserves Veteran

