

Covenant Partner (member) Information

Last Name:

Individual #1:

First name:
Address:
Home #: Work #: Cell #:
Email (primary):
Email (2ndary):
DOB:
Marital Status: Please select...
Ethnicity: Please select...

Individual #2 / Spouse:

First name:
Work #: Cell #:
Email (primary):
Email (2ndary):
DOB:
Misc:
Ethnicity: Please select...

of Children living at home = _____ (use back to add info on additional children)

Adult Children living away (23 and younger—name and DOB only)

<i>Full Name</i>	<i>Called</i>	<i>M/F</i>	<i>DOB</i>	<i>Baptized? Date?</i>	<i>Grade</i>	<i>School</i>

*Are you or your spouse transferring your membership from another church?
If so, church name and address:*

Positions, responsibilities in former church? Elder? Deacon?

Which service do you usually attend? 8:45 Sanctuary 11:00 Worship Center

Last Name:

Who/what first brought you to First Pres?

Why are you choosing to join First Pres?

Do you attend a Sunday School class or Small Group at First Pres?

Other involvement at First Pres?

Any questions about programs or service opportunities?

Would you like more info about Sunday School or Small Groups?

Any special circumstances in your life of which you'd like the pastors to be aware?

Prayer requests?

Additional comments or information you would like to share?

<i>Baptized:</i>	#1: <input type="checkbox"/> Yes <input type="checkbox"/> No	#2: <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Covenant Partner Class:</i>	#1: <input type="checkbox"/> Yes <input type="checkbox"/> No	#2: <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Method of Joining:</i>	#1:	#2: