

# Emanuel's Lutheran Church

## New Member Profile

*Please print clearly*

*Please fill this form out completely to the best of your ability.  
All information remains confidential.*

### Head of Household:

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Goes By: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Sex: M/F Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Listed/Unlisted (Circle one) Cell: \_\_\_\_\_ Listed/Unlisted

Work Phone: \_\_\_\_\_ Listed/Unlisted (Circle one)

E-mail Address: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Place: \_\_\_\_\_

Date of Confirmation: \_\_\_\_\_ Place: \_\_\_\_\_

Date of First Communion: \_\_\_\_\_ Place: \_\_\_\_\_

Date of Marriage (if applicable): \_\_\_\_\_ Place: \_\_\_\_\_

Place of employment: \_\_\_\_\_ Occupation \_\_\_\_\_

Level of Education: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Ethnic Origin: \_\_\_\_\_ Hobbies: \_\_\_\_\_

### Spouse: (If Applicable)

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Goes By: \_\_\_\_\_

Sex: M/F Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Listed/Unlisted (Circle one) Cell: \_\_\_\_\_ Listed/Unlisted

E-mail Address: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Place: \_\_\_\_\_

Date of Confirmation: \_\_\_\_\_ Place: \_\_\_\_\_

Date of First Communion: \_\_\_\_\_ Place: \_\_\_\_\_

*Please complete page 2*

Place of employment: \_\_\_\_\_ Occupation \_\_\_\_\_

Level of Education: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Ethnic Origin: \_\_\_\_\_ Hobbies: \_\_\_\_\_

**Family Information:**

***Child (living at home):***

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Sex: M/F Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Place: \_\_\_\_\_

Date of Confirmation: \_\_\_\_\_ Place: \_\_\_\_\_

Date of First Communion: \_\_\_\_\_ Place: \_\_\_\_\_

Grade in School: \_\_\_\_\_ Will be joining with you? \_\_\_\_\_

Ethnic Origin: \_\_\_\_\_

***Child (living at home):***

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Sex: M/F Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Place: \_\_\_\_\_

Date of Confirmation: \_\_\_\_\_ Place: \_\_\_\_\_

Date of First Communion: \_\_\_\_\_ Place: \_\_\_\_\_

Grade in School: \_\_\_\_\_ Will be joining with you? \_\_\_\_\_

Ethnic Origin: \_\_\_\_\_

**Family or Friends who are members of Emanuel's:** *(Please State Relationship)* \_\_\_\_\_

**Are you transferring from another church:** Yes / No (Circle one)

**If so:** \_\_\_\_\_  
Church Name City State Zip Phone

**Is there anything else we need to know? (Special needs, skills, etc.)**