



**LUTHERAN CHURCH
OF THE ASCENSION**
A FAITH COMMUNITY ON CHICAGO'S NORTH SHORE

**460 Sunset Ridge Road
Northfield, IL 60093
(847)446-8335
info@ascension-church.org**

New Member Profile Form

A member profile must be completed for each member of your family including children who are members of Ascension. Please return completed forms to the church office.

Please note: *Church policy states that none of your personal information will be given out to any outside agency.*

Name : (Last) _____ (First) _____

Maiden Name: _____ Preferred Name: _____

Address: _____

City, State, Zip Code _____

Alternative Addresses (college, winter or summer home, military, etc.)

Address: _____

City, State, Zip Code _____

Home _____ Cell: _____ Work: _____

Email address: _____

Birthdate: _____ Gender: _____ Marital Status: _____

All voting members will be added to our secure online directory through Realm.

Please check here if you wish to opt out of the online directory.

Membership Information

Date Joined: _____ Previous church membership: _____

Date and Place of Baptism: _____

Date and Place of First Communion: _____

Date and Place of Confirmation: _____

Date and Place of Wedding: _____

Ethnic Origin: _____ Languages Spoken: _____

Vocation: _____

(If you are retired, please indicate what profession you retired from.)

What is your preferred method of contact: ___Home Phone ___Cell Phone ___Email (Check one)

How would you like to receive your newsletter: _____ Mail ___Email (Check one)

How would you like to receive your giving statement: _____Mail _____Email (Check one or both)

(In order to save on cost, please consider receiving your newsletter by email)

If a minor, please list parent's names:

Mother _____ Father _____

How would you like to connect at Lutheran Church of Ascension?

___Bible Studies ___ Music Ministry ___Children's Ministry ___Service Projects

Other areas of interest? _____

Photographs: Would you be willing to provide a photo for the Ascension directory? ___Yes ___No

Photography Release:

With my signature below, I authorize use of photos, images or video clips of my children at church events for the website or print publicity. I understand that my child's name will not be used.

Children's Names: _____

Signature: _____ Relationship to Child: _____

For office use only:

Member Status: _____ Record Type: _____

Joined how: _____

Envelope #: _____ Realm: _____ Constant Contact: _____

Groups: _____

Pathways: _____

Notes: _____