

Come, Celebrate & Connect at Trinity

Please help us to get to know you better by completing a New Member Profile Sheet.
Please include the following information for each member of your family as it applies:

Name (s) _____

What do you do for fun? _____

What kind of work do you do? _____

How can we help you grow as a disciple at Trinity? (Please check the areas you would like to know about?)

Worship/Music

- Worship Leader
- Choirs
- Bells
- Worship Prep

Prayer

- Prayer Chain
- Prayer Vigil

Study

- Adult Bible Studies
- Sunday Morning
- Other times

Fellowship

- Women's Groups
- Men's Groups
- Small Groups
- Facilities Care
- Senior Groups

Service

- Feeding the hungry
- Habitat for Humanity
- Children Shelter Meals
- Environment

Witness

- Welcoming guests
- Oktoberfest
- Bread delivery

Children/Youth

- Elementary age
- Middle School
- High School

Other Areas you would like to explore:

Office Use

Date Joined: _____

Updated in ACS: _____

TRINITY LUTHERAN CHURCH - ADULT MEMBERSHIP INFORMATION

FAMILY INFORMATION

Last Name: _____ **Home Phone:** _____
Address: _____ **Date of Marriage:** _____
City/State/Zip: _____
Date to be received: _____ **Worship service attending:** Sat. 5:00pm
Sun. 8:30am
Sun. 9:45am
Sun. 11:00am

INDIVIDUAL INFORMATION

Last Name: _____
First Name: _____ **Goes by name:** _____
Middle Name: _____ **Gender:** Male/Female
Email: _____ **Receive Church E-News:** YES/NO
Cell Phone: _____ **Receive Church Info by Text:** YES/NO
Marital Status: Single / Married / Widow / Widower / Divorced
Birth: **Date:** _____ **City/State:** _____
Baptism: **Date:** _____ **Church/Location:** _____
Confirmed: **Date:** _____ **Church/Location:** _____
Company: _____ **Work Phone:** _____
Position: _____ **Work Email:** _____
Present Church _____
Street: _____
City /State/Zip: _____
Contributions: Individual / Combine with Spouse

INDIVIDUAL INFORMATION

Last Name: _____
First Name: _____ **Goes by name:** _____
Middle Name: _____ **Gender:** Male/Female
Email: _____ **Receive Church E-News:** YES/NO
Cell Phone: _____ **Receive Church Info by Text:** YES/NO
Marital Status: Single / Married / Widow / Widower / Divorced
Birth: **Date:** _____ **City/State:** _____
Baptism: **Date:** _____ **Church/Location:** _____
Confirmed: **Date:** _____ **Church/Location:** _____
Company: _____ **Work Phone:** _____
Position: _____ **Work Email:** _____
Present Church _____
Street: _____
City /State/Zip: _____
Contributions: Individual / Combine with Spouse

TRINITY LUTHERAN CHURCH - CHILD MEMBERSHIP INFORMATION

INDIVIDUAL INFORMATION (Child)

Last Name: _____ Suffix: _____ Gender: Male/Female
First Name: _____ Goes by name: _____
Middle Name: _____ Date of First Communion: _____
Birth: Date: _____ City/State: _____
Baptism: Date: _____ Church/Location: _____
Confirmed: Date: _____ Church/Location: _____
Grade in School: _____ Graduation Year: _____

INDIVIDUAL INFORMATION (Child)

Last Name: _____ Suffix: _____ Gender: Male/Female
First Name: _____ Goes by name: _____
Middle Name: _____ Date of First Communion: _____
Birth: Date: _____ City/State: _____
Baptism: Date: _____ Church/Location: _____
Confirmed: Date: _____ Church/Location: _____
Grade in School: _____ Graduation Year: _____

INDIVIDUAL INFORMATION (Child)

Last Name: _____ Suffix: _____ Gender: Male/Female
First Name: _____ Goes by name: _____
Middle Name: _____ Date of First Communion: _____
Birth: Date: _____ City/State: _____
Baptism: Date: _____ Church/Location: _____
Confirmed: Date: _____ Church/Location: _____
Grade in School: _____ Graduation Year: _____

INDIVIDUAL INFORMATION (Child)

Last Name: _____ Suffix: _____ Gender: Male/Female
First Name: _____ Goes by name: _____
Middle Name: _____ Date of First Communion: _____
Birth: Date: _____ City/State: _____
Baptism: Date: _____ Church/Location: _____
Confirmed: Date: _____ Church/Location: _____
Grade in School: _____ Graduation Year: _____