



*Each adult person in the household is to individually complete this form.
Children should be listed on only one form, either mother or father.*

Membership Application / Information Form

Desiring to unite with this congregation, I affirm and confess my faith in the Triune God through my Lord and Savior, Jesus Christ. I desire a closer relationship with Christ, my Savior, through regular participation in the Sacrament of Holy Communion and through regular attendance at the services of worship.

I recognize that faith without works is dead and therefore, will do all in my power to show my love for Christ and His people in Christian service, doing my part in the congregation's program of ministry, witnessing to His love in my life, using my God-given abilities as I am able, and by supporting this congregation with a proportionate share of my income.

FULL NAME _____

ADDRESS _____ CITY _____ ST _____ ZIP _____

PHONE _____ CELL _____ EMAIL _____

BIRTH DATE _____ CITY/STATE _____

BAPTISM DATE _____ CHURCH / CITY/STATE _____

CONFIRMATION DATE _____ CHURCH / CITY/STATE _____

MOST RECENTLY A MEMBER AT (Congregation & location) _____

WHO WILL REQUEST LETTER OF TRANSFER? I WILL CHRIST THE KING

I AM: MARRIED SINGLE WIDOWED

SPOUSE'S NAME _____ MARRIAGE DATE / LOCATION _____

I understand that the Lutheran Church and particularly this congregation, functions according to the New Testament principle of free will offerings and that it has no other source of income than that of members' voluntary contributions. I shall, therefore, contribute to God's work through this congregation as I am able as God prospers me, regularly and with joy and thanksgiving.

SIGNATURE _____ DATE _____

Please list NAME, BIRTHDAY & BAPTISMAL INFORMATION of children living at home:

NAME _____ BIRTH DATE _____

BAPTISM DATE _____ CHURCH _____ COMMUNING: YES NO

NAME _____ BIRTH DATE _____

BAPTISM DATE _____ CHURCH _____ COMMUNING: YES NO

NAME _____ BIRTH DATE _____

BAPTISM DATE _____ CHURCH _____ COMMUNING: YES NO

Please list NAME & AGE of children not living at home:

(See next page to complete this form)

