

One in Christ Church Membership Information

Name (First, Middle and Last) _____

Date of Birth _____

Address _____

Home Phone _____

Email Address _____

Cell Phone _____ (If desired)

Family Members	Relationship	Member of One in Christ
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Previous Congregation _____

I will request a transfer from this congregation _____

Do you want One in Christ to request a transfer for you? _____

(Please provide address of previous congregation)

Baptism Date _____

If you are interested in being baptized, please check here and someone will contact you. _____

Occupation _____

Business Address _____

Business Phone _____

Hobbies _____

Areas of Interest (Circle as many as apply)

Worship: Planning, Ushering, Greeting, Music, Leading, Serving Communion

Education: Children, Youth, Adult, Confirmation

Governing: Finance, Leadership, Ministerial Support Team, Missions, Visioning, Welcoming

General Office Help

Service Project Help

Monthly/Weekly Bible Studies

Where would you like to be in your spiritual life in 5 years?

What are your expectations as a member of One in Christ?

How did you hear about One in Christ?

Is there any other information you would like to share?

Would you like Pastor to contact you? _____

10/17/05