

Trinity Lutheran Church

**Personal Data**

Please complete one for each member of the household

<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>Suffix</i>
Preferred/Nickname: _____	Sex: <b>M</b> <b>F</b>	Baptized?: <b>Y</b> <b>N</b>	_____/_____/_____
Last name of Household: _____		Confirmed?: <b>Y</b> <b>N</b>	_____/_____/_____
Position in Household (circle one): <b>Head</b> <b>Spouse</b> <b>Child</b> <b>Other</b>		First Communion?: <b>Y</b> <b>N</b>	_____/_____/_____
Birth Date: ____/____/____ Maiden Name: _____		Place of Birth: _____	
Ethnic Origin: _____		Church Background: _____	
Father's Name: _____		Mother's Name: _____	
Marital Status (circle one): <b>Single</b> <b>Married</b> <b>Divorced</b> <b>Widowed</b>		Spouse Name: _____	
Wedding Date: ____/____/____ If widowed, date: ____/____/____		# of Children _____ # of Children Living: _____	
Employer: _____		Occupation: _____	
Work Shift: _____		Military Status: _____	
Education Level: _____			

**For those under 18:**

Current School: \_\_\_\_\_ Current Grade: \_\_\_\_\_ Sun. Sch. Grade: \_\_\_\_\_

**Email Addresses**

Personal Email: \_\_\_\_\_  
Work Email: \_\_\_\_\_

**Former Church Membership Information**

Name of Church: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

***Office Use Only***  
Date received: \_\_\_\_\_  
Data entered: \_\_\_\_\_