

NEW MEMBER, MARRIAGE OR BAPTISM INFORMATION

____ YOUR _____ PRESBYTERIAN CHURCH, _____, IL

PLEASE FILL OUT APPROPRIATE BOX OR BOXES

NEW MEMBER INFORMATION

Full Name:		
Date of birth:	Phone:	Phone:
Current address:		
E-mail:	Spouse name:	
Previous Church Membership :		
Previous Church Membership - Address:		
Baptized: Yes No	To be Baptized? Yes No Date:	Date of Membership:

NEW MEMBER INFORMATION

Full Name:		
Date of birth:	Phone:	Phone:
Current address:		
E-mail:	Spouse name:	
Previous Church Membership :		
Previous Church Membership - Address:		
Baptized: Yes No	To be Baptized? Yes No Date:	Date of Membership:

MARRIAGE INFORMATION (RECORD NAMES PRIOR TO AND AFTER MARRIAGE)

Spouse Full Name (prior):	Church Member? Yes No
Spouse Full Name (prior):	Church Member? Yes No
Spouse Full Name (after):	
Spouse Full Name (after):	
Address at time of marriage:	
Address at time of marriage:	
Date of Marriage:	Place of Marriage:
Officiant:	

CHILD BAPTISM INFORMATION

Parent Name (include maiden name if applicable):	
Parent Name (include maiden name if applicable):	
Child's Full Name:	Date of Baptism:
Date of Birth:	Place of Birth:
Officiant:	