

Milford Presbyterian Church

New Member Information Form

(If both you and your spouse are joining, each of you to fill out a separate form.)

Your Full Name: _____ Today's Date: _____
First Middle Last

Name you prefer to be called: _____ Please circle one below:
 Single Married Divorced Widow Widower

Street Address: _____ Your Date of Birth: _____

Town/City/Zip: _____ Spouse's Name: _____
Preferred mailing address (if different from above) First Middle

Street Address: _____ Spouse's Date of Birth: _____

Town/City/Zip: _____ Spouse's Occupation: _____

Occupation: _____ Employer's Address: _____

Employer Address: _____ Home Phone: _____

Home Phone: _____ Work Phone: _____

Work Phone: _____

Email: _____

Child's Name	Child's Relationship (check one)			Birthdate	Baptized ?	School and Grade
	Ours	Mine	Spouse's		Yes/No	
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Have you made a confession of faith in Jesus Christ as your Lord and Savior? ___Yes or ___No

Have you been baptized in a Christian church? ___Yes or ___No

Name of Church where baptized: _____ Are you a member of a church? ___Yes ___No

Address: _____ Name of church: _____

Address: _____

Have you served a previous church as:

An Elder? ___Yes ___No

A Deacon ___Yes ___No

A Trustee? ___Yes ___No

How are you going to be received into this church?

___Baptism & Confession of Faith

___Confirmation of Baptismal Vows

___Reaffirmation of Faith

___Letter of Transfer (we will send the request)

I would like to become involved in: Church School _____ Choir _____ Bible Study _____

Women's Association _____ Men's Association _____

Church use only --- Chronological Roll Number Assigned: _____