

# Christiania Lutheran Church Family Information Sheet

DATE: \_\_\_\_\_

**ADULTS:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

MARRIED:      YES              NO              IF YES, DATE \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

BAPTISM DATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

CONFIRMATION DATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

NAME: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

BAPTISM DATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

CONFIRMATION DATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

**CHILDREN:** (ARE YOU A TEEN ON FACEBOOK? IF SO, PLEASE JOIN OUR GROUP "CHRISTIANIA YOUTH" TO GET CONNECTED WITH YOUTH AND EVENTS AT CHRISTIANIA.)

NAME: \_\_\_\_\_ SCHOOL GRADE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

BAPTISM DATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

CONFIRMATION DATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

NAME: \_\_\_\_\_ SCHOOL GRADE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

BAPTISM DATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

CONFIRMATION DATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

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BIRTHDATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

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CONFIRMATION DATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

NAME: \_\_\_\_\_ SCHOOL GRADE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

BAPTISM DATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

CONFIRMATION DATE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

PLEASE TRANSFER MY MEMBERSHIP FROM MY FORMER CHURCH: (NAME & ADDRESS)

\_\_\_\_\_  
\_\_\_\_\_

**HOW DID YOU HEAR ABOUT CHRISTIANIA?**

**WHAT DO YOU LIKE ABOUT OUR FAITH COMMUNITY?**

**WHY DID YOU DECIDE TO JOIN?**

**IF YOU ARE NEW TO THE AREA, WHERE DID YOU LIVE PRIOR TO MOVING?**

**TELL US ABOUT YOURSELF: HOBBIES, INTERESTS, CAREER, MILITARY SERVICE (BRANCH AND YEARS OF SERVICE), ECT.**

NAME OF FAMILY MEMBER:

NAME OF FAMILY MEMBER:

NAME OF FAMILY MEMBER:

NAME OF FAMILY MEMBER:

NAME OF FAMILY MEMBER:

**WHAT ARE YOU INTERESTED IN PARTICIPATING IN OR SERVING ON IN OUR FAITH COMMUNITY?**

NAME OF FAMILY MEMBER:

NAME OF FAMILY MEMBER:

NAME OF FAMILY MEMBER:

NAME OF FAMILY MEMBER:

NAME OF FAMILY MEMBER:

**I/We would like to receive the weekly email, please include the following email address(es):**

**NOTES FOR THE STAFF:**

OFFICE USE:

ICON

CONSTANT CONTACT

AUGSBURG FORTRESS