

Saint Mark Lutheran Church

Kaneohe, Hawaii

Membership Application Form



Last Name _____

Date _____

Address _____

Home Phone Number _____

E-mail Address: _____

Include address and phone number in the church directory? Yes No

Are you on active military? Yes No Approximate Date of Next Deployment: _____



Your First Name _____

Birth date: _____

Place of Birth: _____

Baptism Date: _____

Place of Baptism: _____ Not Baptized

Confirmation Date: _____

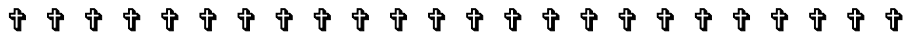
Place of Confirmation: _____

Employer: _____

Previous Church Membership _____ Please request a transfer

Membership Status: Desiring Membership Member Participating Military Non-member

If you are single, please proceed to the Time and Talent section. If married, please continue with the following section. Please indicate if your spouse and/or children will also be joining Saint Mark Lutheran Church. You do not have to list adult children who will not be living with you.



Spouse's First Name _____

Anniversary Date _____

Place of Marriage: _____

Birth date: _____

Place of Birth: _____

Baptism Date: _____

Place of Baptism: _____ Not Baptized

Confirmation Date: _____

Place of Confirmation: _____

Employer: _____

Previous Church Membership _____ Please request a transfer

Membership Status: Desiring Membership Member Participating Military Non-member

All information on this form is confidential and will only be used for ministry purposes for this congregation. The only mailing list outside of the congregation that your name may be shared is to our High School in Honolulu for their annual fund drive. Thank you for your kokua!

Children:

Name: _____ Grade in School: _____

Birth date: _____ Place of Birth: _____

Baptism Date: _____ Place of Baptism: _____ Not Baptized

Confirmation Date: _____ Place of Confirmation: _____

Name: _____ Grade in School: _____

Birth date: _____ Place of Birth: _____

Baptism Date: _____ Place of Baptism: _____ Not Baptized

Confirmation Date: _____ Place of Confirmation: _____

Name: _____ Grade in School: _____

Birth date: _____ Place of Birth: _____

Baptism Date: _____ Place of Baptism: _____ Not Baptized

Confirmation Date: _____ Place of Confirmation: _____

Name: _____ Grade in School: _____

Birth date: _____ Place of Birth: _____

Baptism Date: _____ Place of Baptism: _____ Not Baptized

Confirmation Date: _____ Place of Confirmation: _____

Last Name: _____ First Name: _____

For Church Use Only

Received into Membership by: ___ Confirmation ___ Transfer ___ Profession of Faith

Date Received: _____ Offering Envelope Number: _____

Transfer Requested: _____ Date Received: _____ Added to email list: _____

Information Recorded in Computer: _____ Information added to directory: _____

Time/Talent form reviewed and disseminated: ___ Photographer ___ Financial Secretary

Elder Assigned to the Family: _____