

Christ's Lutheran Church ~ Oreland, PA

Voice: 215-886-4612 | email: christlutheran1@comcast.net.

Membership Information Form | New and Existing

PLEASE PRINT AND COMPLETE AS MUCH AS POSSIBLE FOR THE PARISH REGISTER

Last Name:			
Address:	State: Zip:		
Home Phone:	Listed Unlisted		
Adult Member / Spouse or Parent			
First Name:	Middle Initial:		
Cell Phone:	Employer:		
Work Phone:	May we call you at work? Yes ☐ No ☐		
Email Address:			
Please list Month/Day/Year			
Birth:	Place:		
Baptism:	_ Place:		
Confirmed:	Place:		
Married:	Place:		
Adult Member / Spouse or Parent First Name:	Middle Initial		
Cell Phone: Work Phone:	Man and a document of the control of		
Email Address:	_ May we call you at work? Yes ☐ No ☐		
Please list Month/Day/Year	_		
Birth:	Place		
Dantiana	Place:		
Confirmed:	Place: Place:		
Married:	Place:		

DEPENDANT CHILDREN: Name:		Birth Date:
Baptized:	Confirmed:	
Addroco:	Year:	
Name:		Birth Date:
Baptized: In College: yes no	Confirmed: Year:	
College Name:		
Name:		Birth Date:
Baptized:	Confirmed:	
In College: yes no College Name:		
Addross:		
Name:		Birth Date:
Baptized:	Confirmed:	
In College: yes no College Name:		
Address:		
		rist's Lutheran Church including etc. for the purpose of visitation:
Additional Notes or Comme	nts:	
Received into Congregation	al Membership:	
available to CLC members in	n a printed form or a	o be published in the church directory s a secured electronic copy. # yes – Email yes - photo
Signature		 Date