

MEMBERSHIP CLASS REGISTRATION FORM for session beginning ___/___/___

This form registers you for the membership class you indicated above. If you have any questions please contact the church office.

Last Name _____

Address _____
Street

_____ Cell Telephone _____
City State Zip

Home Telephone (____) _____ Household E-Mail _____

Primary Contact (Mr. Mrs Ms) _____
First Middle Last Maiden (if applicable)

Employer _____ Title/Occupation _____

Work Phone (____) _____ Personal e-mail _____

Emergency Contact other than spouse: _____
Name Relationship Phone number

Birth Date ___/___/___ Date Married (if app.) ___/___/___ Single Divorced Widow/er

Baptism Date ___/___/___ Church and City _____

Confirmation Date ___/___/___ Church and City _____

What was your previous church? _____
Church City State

Would you like offering envelopes at this time? Yes _____ Please wait _____

I want to become a member. I will make up my mind about membership later.
If you are a member of another church and are joining at this time, please contact the church and ask that they transfer or release your membership to Prince of Peace.

Worship Service you typically attend: Sat. 5:00pm Sun. 8:00am 9:30am 11:00am

Spouse or

Secondary Contact (Mr. Mrs Ms) _____
First Middle Last Maiden (if applicable)

Employer _____ Title/Occupation _____

Work Phone (____) _____ Personal E-mail _____

Birth Date ___/___/___ Cell Telephone _____

Baptism Date ___/___/___ Church and City _____

Confirmation Date ___/___/___ Church and City _____

What was your previous church? _____
Church City State

I want to become a member. I will make up my mind about membership later. I am not joining.
If you are a member of another church and are joining at this time, please contact the church and ask that they transfer or release your membership to Prince of Peace.

PLEASE TURN OVER THIS PAGE TO FILL IN THE NAMES AND ADDRESSES OF YOUR CHILDREN LIVING WITH YOU AND THOSE NOT LIVING WITH YOU.

Child 1 _____ Birth Date ____/____/____
FIRST Middle LAST

Baptism Date ____/____/____ Church and City _____

Confirmation Date ____/____/____ Church and City _____

Grade in School _____

Child 2 _____ Birth Date ____/____/____
FIRST Middle LAST

Baptism Date ____/____/____ Church and City _____

Confirmation Date ____/____/____ Church and City _____

Grade in School _____

Child 3 _____ Birth Date ____/____/____
FIRST Middle LAST

Baptism Date ____/____/____ Church and City _____

Confirmation Date ____/____/____ Church and City _____

Grade in School _____

Child 4 _____ Birth Date ____/____/____
FIRST Middle LAST

Baptism Date ____/____/____ Church and City _____

Confirmation Date ____/____/____ Church and City _____

Grade in School _____

Please list any adult children not living at home

1. Name _____ Phone () _____
Address _____

2. Name _____ Phone () _____
Address _____

3. Name _____ Phone () _____
Address _____

4. Name _____ Phone () _____
Address _____

Occasionally, Prince of Peace publishes names, addresses, phone numbers, email addresses, and photographs of church members and/or visitors in the church newsletter, info bulletin, directory, and other forms of church publications. We also may send emails to members who have provided their email addresses and publish names and photos on the web site. We assume that we have your permission to do this. If you do NOT want us to use your personal information in this way, please provide a letter to Dennis Freres, Parish Administrator.

Prince of Peace Lutheran Church

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