



## PRINCE OF PEACE EVANGELICAL LUTHERAN CHURCH

319 Orkney Grade, PO Box 626, Basye, VA 22810

540-856-2986 poplutheran@gmail.com

### Membership Information

Membership type:  Full  Associate

Date joined: \_\_\_\_\_

A) Name: \_\_\_\_\_  
*First Middle Last (Maiden)*

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

B) Name: \_\_\_\_\_  
*First Middle Last (Maiden)*

Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_

If married, marriage date: \_\_\_\_\_ Location: \_\_\_\_\_

Home Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

A) Primary Phone: \_\_\_\_\_ B) Primary Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ *(Please include area codes.)*

A) Email Address: \_\_\_\_\_ B) Email address \_\_\_\_\_

Do you wish to receive emails from the church?  Yes  No

Present Church Membership: \_\_\_\_\_

A) Baptized?  Yes  No If so, where? \_\_\_\_\_ Date: \_\_\_\_\_

A) Confirmed?  Yes  No If so, where? \_\_\_\_\_ Date: \_\_\_\_\_

B) Baptized?  Yes  No If so, where? \_\_\_\_\_ Date: \_\_\_\_\_

B) Confirmed?  Yes  No If so, where? \_\_\_\_\_ Date: \_\_\_\_\_

Emergency contact of someone outside your home:

Name & phone \_\_\_\_\_

Name & phone \_\_\_\_\_

*Please feel free to give additional information (i.e. alternate address, children's names) on the back of this form.*

Letter of transfer:  sent \_\_\_\_\_  received \_\_\_\_\_ Recorded in rolls date: \_\_\_\_\_  
Date Date