

AUBURN SEVENTH-DAY ADVENTIST CHURCH

New Member Statistical Form

Please fill out and return to the church office. Thank you!

Date _____

FULL NAME

_____	_____	_____	_____
First	Middle or Maiden	Last	Date of Birth (M/D/Y)
Occupation _____	Employer _____	Work Phone _____	
Home Phone _____	Cell Phone _____	Email _____	
Baptismal Date (M/D/Y) _____	Place of Baptism _____	Baptized by _____	
Language Spoken _____	Marriage Date (M/D/Y) _____	Gender: M. F.	Marital Status: S. M. D. W.

SPOUSE'S FULL NAME

_____	_____	_____	_____
First	Middle or Maiden	Last	Date of Birth (M/D/Y)
Occupation _____	Employer _____	Work Phone _____	
Home Phone _____	Cell Phone _____	Email _____	
Baptismal Date (M/D/Y) _____	Place of Baptism _____	Baptized by _____	
Language Spoken _____	Marriage Date (M/D/Y) _____	Gender: M. F.	Marital Status: S. M. D. W.

EMERGENCY CONTACT INFO (If no other family members are members of the Auburn SDA Church)

Name _____ Relationship _____ Contact Number _____

HOME ADDRESS

Residence _____
Street Address City State Zip Code

Mailing Address _____
(If different) Street Address City State Zip Code

If you have children living at home please fill out the back side ->



CHILD FULL NAME

First	Middle	Last	Date of Birth (M/D/Y)
-------	--------	------	-----------------------

Baptismal Date (M/D/Y) _____ Place of Baptism _____ Baptized by _____

School Attending _____ Type of School: SDA Public/Other (*Circle one*)

Grade _____ Gender: Male Female (*Circle one*)

CHILD FULL NAME

First	Middle	Last	Date of Birth (M/D/Y)
-------	--------	------	-----------------------

Baptismal Date (M/D/Y) _____ Place of Baptism _____ Baptized by _____

School Attending _____ Type of School: SDA Public/Other (*Circle one*)

Grade _____ Gender: Male Female (*Circle one*)

CHILD FULL NAME

First	Middle	Last	Date of Birth (M/D/Y)
-------	--------	------	-----------------------

Baptismal Date (M/D/Y) _____ Place of Baptism _____ Baptized by _____

School Attending _____ Type of School: SDA Public/Other (*Circle one*)

Grade _____ Gender: Male Female (*Circle one*)

CHILD FULL NAME

First	Middle	Last	Date of Birth (M/D/Y)
-------	--------	------	-----------------------

Baptismal Date (M/D/Y) _____ Place of Baptism _____ Baptized by _____

School Attending _____ Type of School: SDA Public/Other (*Circle one*)

Grade _____ Gender: Male Female (*Circle one*)

CHILD FULL NAME

First	Middle	Last	Date of Birth (M/D/Y)
-------	--------	------	-----------------------

Baptismal Date (M/D/Y) _____ Place of Baptism _____ Baptized by _____

School Attending _____ Type of School: SDA Public/Other (*Circle one*)

Grade _____ Gender: Male Female (*Circle one*)

