



MEMBERSHIP PROFILE QUESTIONNAIRE

HEAD OF HOUSEHOLD INFORMATION

First Name:		Middle Name:	Last Name:
Date of birth:	Cellular Phone:	Home Phone:	
Current address:			
City:	State:	ZIP Code:	
Email:	Marital Status:	Anniversary Date:	
Occupation:	Employer:		
Last Church Attended:	Were You a Member (please circle): Yes No	Baptized By Immersion: Yes No Date: ___/___/___	

SPOUSE INFORMATION

First Name:		Middle Name:	Last Name:
Date of Birth:	Cellular Phone:	Home Phone:	
Current Address:			
City:	State:	ZIP Code:	
Email:	Occupation:	Employer:	
Last Church Attended:	Were You a Member (please circle): Yes No	Baptized By Immersion: Yes No Date: ___/___/___	

CHILDREN (CONTINUE IN PERSONAL COMMENTS SECTION IF NECESSARY)

Name (first, middle, last)	Birthdate	Grade	Baptized
	___/___/___		Yes/No Date: ___/___/___
	___/___/___		Yes/No Date: ___/___/___
	___/___/___		Yes/No Date: ___/___/___
	___/___/___		Yes/No Date: ___/___/___

SKILLS AND TALENTS

(Please Check All That Apply, H = Head of Household, S=Spouse)

H	S		H	S		H	S	
		Administration			Handy Man			Writing
		Artist			Music	Interest In Specific Team:		
		Caregiver			Photography			Fellowship/Hospitality
		Carpentry			Pianist			General Housekeeping
		Computer			Plumbing			Maintenance
		Cooking			Public Speaking			Nursery
		Design			Singing			Office Volunteer
		Electrical			Teaching			Sunday School Teacher
		Gardening			Driver			Worship Team
		Handicrafts			Typing			Interest In Team Leader Op.

