

We are presently working on 'cleaning' up our membership database here at Bookwalter and want to make sure that your information is included and is accurate. Please fill out as much information as you can below and drop them off in the designated boxes located in the church. Thanks in advance for all your help.

Membership Information

	Head of Household	Spouse
Title: (Circle one)	Mr. Mrs. Miss. Ms. Dr. Rev. Other _____	Mr. Mrs. Miss. Ms. Dr. Rev. Other _____
Name: (First - Middle or Maiden - Last)		
Sex: (Check one)	Male <input type="checkbox"/> Female <input type="checkbox"/>	Male <input type="checkbox"/> Female <input type="checkbox"/>
Birthday: (yr. optional)	Date: _____	Date: _____
Preferred or Nickname		
Address: City / State / Zip:	_____ / _____ / _____	_____ / _____ / _____
Alternate Address Address: City, State / Zip:	From: _____ To: _____ _____ / _____ / _____	From: _____ To: _____ _____ / _____ / _____
Home Phone:	() - Unlisted? <input type="checkbox"/>	() - Unlisted? <input type="checkbox"/>
Cell Phone:	() - Unlisted? <input type="checkbox"/>	() - Unlisted? <input type="checkbox"/>
Work Phone	() - Unlisted? <input type="checkbox"/>	() - Unlisted? <input type="checkbox"/>
Email		
Pager #:	() - Unlisted? <input type="checkbox"/>	() - Unlisted? <input type="checkbox"/>
Fax #:	() - Unlisted? <input type="checkbox"/>	() - Unlisted? <input type="checkbox"/>
Extra Phone:	() - Unlisted? <input type="checkbox"/>	() - Unlisted? <input type="checkbox"/>
Emergency Contact: Name – Phone Number		
Marital Status:		
Anniversary Date:	Date: _____	Date: _____
Occupation:		
Employer:		
Member Status:		
Church Background		
Sunday School Class:		
Baptized:	yes <input type="checkbox"/> no <input type="checkbox"/> Date: _____	yes <input type="checkbox"/> no <input type="checkbox"/> Date: _____

Children

Name (first, middle, last)	Birth Date	Grade	Baptized	Sunday School Class
	Date: _____		yes <input type="checkbox"/> Date: _____	
	Date: _____		yes <input type="checkbox"/> Date: _____	
	Date: _____		yes <input type="checkbox"/> Date: _____	
	Date: _____		yes <input type="checkbox"/> Date: _____	
	Date: _____		yes <input type="checkbox"/> Date: _____	

Skills

(Please check all that apply, H=Head of household, S=Spouse)

H S	H S	H S
<input type="checkbox"/> <input type="checkbox"/> Administrator	<input type="checkbox"/> <input type="checkbox"/> Computer	<input type="checkbox"/> <input type="checkbox"/> Instrumental (Piano, Organ..etc)
<input type="checkbox"/> <input type="checkbox"/> Artist	<input type="checkbox"/> <input type="checkbox"/> Cooking	<input type="checkbox"/> <input type="checkbox"/> Music
<input type="checkbox"/> <input type="checkbox"/> Bible Reading	<input type="checkbox"/> <input type="checkbox"/> Drama	<input type="checkbox"/> <input type="checkbox"/> Group Singing (Choir...etc)
<input type="checkbox"/> <input type="checkbox"/> Caregiver	<input type="checkbox"/> <input type="checkbox"/> Electrical	<input type="checkbox"/> <input type="checkbox"/> Solo Singing
<input type="checkbox"/> <input type="checkbox"/> Carpentry	<input type="checkbox"/> <input type="checkbox"/> Hand Crafts	<input type="checkbox"/> <input type="checkbox"/> Teaching

Leaders

(Please check all that apply, H=Head of household, S=Spouse)

H S	H S	H S
<input type="checkbox"/> <input type="checkbox"/> Choir Director	<input type="checkbox"/> <input type="checkbox"/> Interim Board	<input type="checkbox"/> <input type="checkbox"/> Treasurer
<input type="checkbox"/> <input type="checkbox"/> Group Leader	<input type="checkbox"/> <input type="checkbox"/> SS Superintendent	<input type="checkbox"/> <input type="checkbox"/> Worship Leader

Activities

(Please check all that apply, H=Head of household, S=Spouse)

H S	H S	H S
<input type="checkbox"/> <input type="checkbox"/> Angel Food	<input type="checkbox"/> <input type="checkbox"/> Keenagers	<input type="checkbox"/> <input type="checkbox"/> Young Adults
<input type="checkbox"/> <input type="checkbox"/> Choir	<input type="checkbox"/> <input type="checkbox"/> Nursery	<input type="checkbox"/> <input type="checkbox"/> Youth Groups
<input type="checkbox"/> <input type="checkbox"/> Children	<input type="checkbox"/> <input type="checkbox"/> Small Groups	<input type="checkbox"/> <input type="checkbox"/>

Spiritual Gifts

(Please check all that apply, H=Head of household, S=Spouse)

H S	H S	H S
<input type="checkbox"/> <input type="checkbox"/> Administration	<input type="checkbox"/> <input type="checkbox"/> Helps	<input type="checkbox"/> <input type="checkbox"/> Music (Instrumental)
<input type="checkbox"/> <input type="checkbox"/> Craftsmanship (arts/crafts)	<input type="checkbox"/> <input type="checkbox"/> Hospitality	<input type="checkbox"/> <input type="checkbox"/> Serving/Helping Others
<input type="checkbox"/> <input type="checkbox"/> Craftsmanship (manual)	<input type="checkbox"/> <input type="checkbox"/> Intercessory Prayer	<input type="checkbox"/> <input type="checkbox"/> Shepherding
<input type="checkbox"/> <input type="checkbox"/> Evangelism	<input type="checkbox"/> <input type="checkbox"/> Knowledge	<input type="checkbox"/> <input type="checkbox"/> Teaching/Public Speaking
<input type="checkbox"/> <input type="checkbox"/> Exhortation/Encouragement	<input type="checkbox"/> <input type="checkbox"/> Leadership	<input type="checkbox"/> <input type="checkbox"/> Wisdom
<input type="checkbox"/> <input type="checkbox"/> Faith	<input type="checkbox"/> <input type="checkbox"/> Mercy	<input type="checkbox"/> <input type="checkbox"/> Writing
<input type="checkbox"/> <input type="checkbox"/> Giving/Generosity	<input type="checkbox"/> <input type="checkbox"/> Music (Vocal)	<input type="checkbox"/> <input type="checkbox"/>

Willing to Serve

H S	H S	H S
<input type="checkbox"/> <input type="checkbox"/> Angel Food	<input type="checkbox"/> <input type="checkbox"/> Hospitality	<input type="checkbox"/> <input type="checkbox"/> Usher
<input type="checkbox"/> <input type="checkbox"/> Assistant	<input type="checkbox"/> <input type="checkbox"/> Maintenance/Grounds	<input type="checkbox"/> <input type="checkbox"/> VBS
<input type="checkbox"/> <input type="checkbox"/> Children's Church	<input type="checkbox"/> <input type="checkbox"/> Music	<input type="checkbox"/> <input type="checkbox"/> Visitation
<input type="checkbox"/> <input type="checkbox"/> Finances	<input type="checkbox"/> <input type="checkbox"/> Nursery	<input type="checkbox"/> <input type="checkbox"/> Youth
<input type="checkbox"/> <input type="checkbox"/> Greeter	<input type="checkbox"/> <input type="checkbox"/> Teaching – Adult, Youth, Child	

Mailing List

H S	H S	H S
<input type="checkbox"/> <input type="checkbox"/> Newsletter	<input type="checkbox"/> <input type="checkbox"/> Church Council Minutes	<input type="checkbox"/> <input type="checkbox"/> Prayer Requests

Comments: _____
