

Zion Lutheran Church

Membership and Contact Information Form

Family Name: _____

(Please include street, PO Box, city, state, zip code)

Physical Address: _____

Mailing Address: _____

Seasonal Address: _____

Our family would like to receive the monthly newsletter and other church

correspondence by: Email (includes weekly email update) USPS Mail

Our family is related to the following Zion members (please list type of relation):

Family Member 2 continued:

First Name _____ Middle Name _____

Last Name (if different than above) _____

Nickname _____

Martial Status _____ Gender _____

Cell Phone _____ Landline Phone _____

Email _____

Birth Date _____ Baptismal Date _____

Confirmation Date _____ Anniversary Date _____

Grade _____ School _____

FAMILY MEMBER 3

Select One: Member Associate Member Seasonal Member
 Friend Community Member Remove from Membership

Select One (if applicable): Homebound In College
 In the Military Non-member Related to
 Zion Member

First Name _____ Middle Name _____

Last Name (if different than above) _____

Nickname _____

Martial Status _____ Gender _____

Cell Phone _____ Landline Phone _____

Email _____

Family Member 3 continued:

Birth Date: _____ Baptismal Date: _____

Confirmation Date _____ Anniversary Date _____

Grade _____ School _____

FAMILY MEMBER 4

Select One: Member Associate Member Seasonal Member
 Friend Community Member Remove from Membership

Select One (if applicable): Homebound In College
 In the Military Non-member Related to
 Zion Member

First Name _____ Middle Name _____

Last Name (if different than above) _____

Nickname _____

Martial Status _____ Gender _____

Cell Phone _____ Landline Phone _____

Email _____

Birth Date _____ Baptismal Date _____

Confirmation Date _____ Anniversary Date _____

Grade _____ School _____

FAMILY MEMBER 5

Select One: Member Associate Member Seasonal Member
 Friend Community Member Remove from Membership

Select One (if applicable): Homebound In College
 In the Military Non-member Related to
 Zion Member

First Name _____ Middle Name _____

Last Name (if different than above) _____

Nickname _____

Marital Status _____ Gender _____

Cell Phone _____ Landline Phone _____

Email _____

Birth Date _____ Baptismal Date _____

Confirmation Date _____ Anniversary Date _____

Grade _____ School _____

Please use an additional form for more family members living in your household.

Use a separate form for family members living in different households.

Return to Zion Lutheran Church Office by Sunday, May 15, 2022.

Thank you.