

# New Member Information (complete both sides)

Date Joined: \_\_\_\_\_

Family Last Name: \_\_\_\_\_

Place:  Sanctuary  Wellspring Other \_\_\_\_\_

Service:  8:00  9:00  10:05  11:10

Home Address: \_\_\_\_\_  
Street City State Zip Code

## Co-Head of Household

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Last Name \_\_\_\_\_ Goes by Name \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: \_\_\_\_\_  
Month Day Year

Single  Married  Partnered  Divorced  Widowed  Engaged

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Preferred Phone: (check one)  Home *or*  Cell

Primary Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Type of work: \_\_\_\_\_

Have you been baptized?  Yes  No  Not Sure

Year/church/place of baptism: \_\_\_\_\_

*If you have never been baptized, you can be baptized at the time you join or you may arrange to be baptized prior to joining.*

Joining by: (check one)

- Transfer from another United Methodist Church
- Transfer from another denomination
- Profession of faith with baptism
- Reaffirmation of faith, already baptized

If transferring: Previous Church: \_\_\_\_\_

City

State

**I am interested in more information about:** *(check all that apply)*

**How to Grow:**

- Adult Sunday School  Bible Studies
- Men's/Women's Studies  Life Groups

**How to Serve:**

- Welcoming/Greeting  Children's/Nursery
- Usher  Youth Ministries
- Music/Choir/Musician  Congregational Care
- Prayer Ministry  Local/Global Missions

Other: \_\_\_\_\_

*For more opportunities visit [www.sharingtheheart.org](http://www.sharingtheheart.org)*

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Do you or your family have any special needs, circumstances, or concerns?

Please list any relatives who attend First United Methodist Church of McKinney (names and relationships):

Name(s): \_\_\_\_\_ Relationship: \_\_\_\_\_

How did you hear about our church?  Friend: \_\_\_\_\_  Website  Drove by  Event: \_\_\_\_\_  Mailing  Other: \_\_\_\_\_

*Photos from church events will be posted on the church website, in the newsletter and on bulletin boards. Addresses and phone numbers are never included. If you do **NOT** wish to have photos posted, please indicate.*

**Do NOT post individual or family photos on the website, newsletter, or bulletin boards.**

**PLEASE COMPLETE THE BACK OF THIS FORM IF YOU HAVE CHILDREN (minors or those still living at home)**

FOR OFFICE USE ONLY: Photo Notes: \_\_\_\_\_

**New Member Information** (continued, page 2 of 2)

**CHILDREN (Minors or those still living at home)**

**CHILD'S NAME:** \_\_\_\_\_ ( \_\_\_\_\_ )  
Last First Middle Goes By

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Male**\_\_\_\_ **Female**\_\_\_\_  
Month Day Year

School attending: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

**Has your child been baptized?**  **Yes**  **No\*** Year baptized: \_\_\_\_\_ Church/City/State: \_\_\_\_\_  
\*If not already baptized, would you like to schedule a baptism?  **Yes**  **No**

**Has your child been confirmed?**  **Yes**  **No** Year: \_\_\_\_\_ Church/City/State: \_\_\_\_\_

Is it your wish for your child to join First United Methodist Church?  **Yes**  **No**

**CHILD'S NAME:** \_\_\_\_\_ ( \_\_\_\_\_ )  
Last First Middle Goes By

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Male**\_\_\_\_ **Female**\_\_\_\_  
Month Day Year

School attending: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

**Has your child been baptized?**  **Yes**  **No\*** Year baptized: \_\_\_\_\_ Church/City/State: \_\_\_\_\_  
\*If not already baptized, would you like to schedule a baptism?  **Yes**  **No**

**Has your child been confirmed?**  **Yes**  **No** Year: \_\_\_\_\_ Church/City/State: \_\_\_\_\_

Is it your wish for your child to join First United Methodist Church?  **Yes**  **No**

**CHILD'S NAME:** \_\_\_\_\_ ( \_\_\_\_\_ )  
Last First Middle Goes By

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Male**\_\_\_\_ **Female**\_\_\_\_  
Month Day Year

School attending: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

**Has your child been baptized?**  **Yes**  **No\*** Year baptized: \_\_\_\_\_ Church/City/State: \_\_\_\_\_  
\*If not already baptized, would you like to schedule a baptism?  **Yes**  **No**

**Has your child been confirmed?**  **Yes**  **No** Year: \_\_\_\_\_ Church/City/State: \_\_\_\_\_

Is it your wish for your child to join First United Methodist Church?  **Yes**  **No**

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Last First Middle Goes By

**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Male**\_\_\_\_ **Female**\_\_\_\_  
Month Day Year

School attending: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

**Has your child been baptized?**  **Yes**  **No\*** Year baptized: \_\_\_\_\_ Church/City/State: \_\_\_\_\_  
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