*Please provide the information below for all members in your household who intend to become members of Our Savior's.

HOUSEHOLD INFORMATION

Household:	sehold:				(How should mail be addressed, such as: Joe Smith; The Smiths; Jane & Joe Smith; Joe Smith & Jane Nelson-Smith; etc.)		
Address:						_ _	
Primary Email:				_	Primary Phone:	() □ Home □ Cell	
Are you currently Church Name:		of another church		□ No	City/State:		
How would you pr	refer to rec	eive our monthly	newsletter:		☐ Email*	□ Mail	
Would you like to	receive ou	r weekly news er	nails?		□ Yes *	□ No	
Would you like a o			☐ Yes nary church co	☐ No mmunicat	tions. Availability is lim	ited.	
Would you like to	receive of	fering envelopes?	Yes □ Yes	□ No	☐ I would like autor	matic/electronic giving information	
* You consent to rece	iving emails	from OSLC via Cor	nstant Contact.	You may	unsubscribe at any time	2.	
Member Joining	g Informa	ntion:					
First Name:				_	Relationships:		
Middle:				_	(spouse, mother, son, d	ivorced, single, widow, etc.)	
Last Name:					Employer:	_	
Preferred/Nicknan	ne.			_	If Current Student,	Grade:	
Former/Maiden N				- -	Birth City/State:	(mm/dd/yy)	
	() □ Cell	☐ Home	□ Work	_	Baptism City/State:	(mm/dd/yy)	
Secondary Phone:	() □ Cell	☐ Home	□ Work	-	Church:		
Email:				_	First Communion City/State:	(mm/dd/yy)	
Gender:	□ Male	☐ Female ☐]	_	Confirmation City/State:	(mm/dd/yy)	
Race (optional):		☐ Asian/Pacific ☐ Native Americ	□ Hispanio aı □ Multi R		Marriage City/State: Church:	(mm/dd/yy)	

Additional Household Members:

First Name:		Relationship:	
Middle:		Employer:	
Last Name:		If Current Student, Grade:	
Preferred/Nicknar	ne:	Birth City/State:	(mm/dd/yy)
Former/Maiden N	ame:	·	
Preferred Phone:	() Cell ☐ Home ☐ Work	Baptism City/State: Church:	(mm/dd/yy)
Email:		First Communion City/State:	(mm/dd/yy)
Gender: Race (optional):	☐ Male ☐ Female ☐ ☐ Black ☐ Asian/Pacific ☐ Hispanic	Confirmation City/State:	(mm/dd/yy)
Other Household (Name: Address:	☐ White ☐ Native Americai ☐ Multi Racial (ie: other parent, if applicable)	Marriage City/State: Church:	(mm/dd/yy)
First Name: Middle:	sehold Members:	Relationship:	
Last Name:		Employer: If Current Student, Grade:	
Preferred/Nicknar		Birth City/State:	(mm/dd/yy)
Former/Maiden N Preferred Phone:	()	Baptism City/State: Church:	(mm/dd/yy)
Email:		First Communion City/State:	(mm/dd/yy)
Gender:	☐ Male ☐ Female ☐	Confirmation	(mm/dd/yy)
Race (optional): Other Household (Name: Address:	☐ Black ☐ Asian/Pacific ☐ Hispanic ☐ White ☐ Native Americal ☐ Multi Racial (ie: other parent, if applicable)	City/State: Marriage City/State: Church:	(mm/dd/yy)

Additional Household Members:

First Name:		Relationship:	
Middle:		Employer:	
Last Name:		If Current Student, Grade:	
Preferred/Nicknar	ne:	Birth City/State:	(mm/dd/yy)
Former/Maiden N	ame:	City/State.	
Preferred Phone:	()	Baptism City/State: Church:	(mm/dd/yy)
Email:		First Communion City/State:	(mm/dd/yy)
Gender: Race (optional):	☐ Male ☐ Female ☐ ☐ Black ☐ Asian/Pacific ☐ Hispanic	Confirmation City/State:	(mm/dd/yy)
Other Household Name: Address:	☐ White ☐ Native Americai ☐ Multi Racial (ie: other parent, if applicable)	Marriage City/State: Church:	(mm/dd/yy)
Additional Hou	sehold Members:		
First Name:		Relationship:	
Middle:		Employer:	
Last Name:		If Current Student, Grade:	
Preferred/Nicknar		Birth City/State:	(mm/dd/yy)
Former/Maiden N Preferred Phone:	Cell Home Work	Baptism City/State: Church:	(mm/dd/yy)
Email:		First Communion City/State:	(mm/dd/yy)
Gender:	☐ Male ☐ Female ☐	Confirmation	(mm/dd/yy)
Race (optional):	☐ Black ☐ Asian/Pacific ☐ Hispanic ☐ White ☐ Native America ☐ Multi Racial	City/State:	
Other Household Name: Address:	(ie: other parent, if applicable)	Marriage City/State: Church:	(mm/dd/yy)

Additional Household Members: First Name: Relationship: Middle: Employer: Last Name: If Current Student, Grade: Preferred/Nickname: Birth (mm/dd/yy) City/State: Former/Maiden Name: (mm/dd/yy) **Baptism** Preferred Phone: (City/State: □ Cell □ Home □ Work Church: **First Communion** Email: City/State: Gender: ☐ Male ☐ Female Confirmation (mm/dd/yy) ☐ Black ☐ Asian/Pacific ☐ Hispanic City/State: Race (optional): ☐ White ☐ Native Americal ☐ Multi Racial Other Household (ie: other parent, if applicable) Marriage _____ (mm/dd/yy) Name: City/State: Address: Church: **Additional Household Members:** First Name: Relationship: Middle: Employer: Last Name: If Current Student, Grade: Preferred/Nickname: **Birth** (mm/dd/yy) City/State: Former/Maiden Name: **Baptism** (mm/dd/yy) Preferred Phone: (City/State: ☐ Cell ☐ Home Church: **First Communion** Email: City/State: Gender: ☐ Male ☐ Female **Confirmation** (mm/dd/yy) Race (optional): ☐ Black ☐ Asian/Pacific ☐ Hispanic City/State: ☐ White ☐ Native Americal ☐ Multi Racial Other Household (ie: other parent, if applicable) Marriage (mm/dd/yy) Name: City/State: Address: Church: