# NEW MEMBER INFORMATION FORM

**Member Information:**

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Initial</th>
<th>Suffix</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

Gender:  [ ] Male  [ ] Female

<table>
<thead>
<tr>
<th>Street Address</th>
<th>Apartment Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
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<table>
<thead>
<tr>
<th>Home Telephone Number</th>
<th>Work Telephone Number</th>
</tr>
</thead>
<tbody>
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</table>

**Email Address**

**Church Information:**

Method Joined:

- [ ] Christian Experience
- [ ] Christian Baptism
- [ ] By Letter
- [ ] Restoration
- [ ] Rededication

Today’s Date:  _____/_____/______

Date of Birth:  _____/_____/______

Date Baptized:  _____/_____/______

Date of Fellowship:  _____/_____/______

Marital Status:  [ ] Single  [ ] Married  [ ] Divorced  [ ] Separated  [ ] Widowed

**Education/Occupation:**

Education Completed:

- [ ] High School
- [ ] B. Sc.
- [ ] B. TH.
- [ ] LL.B.
- [ ] M.S.
- [ ] Ph.D.
- [ ] D.D.
- [ ] College
- [ ] Other
- [ ] B.A.

Are you a business owner?  [ ] Yes  [ ] No

Business Name:  ________________________________

Job/Occupation:  ________________________________

Skills/Talents:  ________________________________

**Family Information:**

Do you have a family member who is a member of MSBC?  [ ] Yes  [ ] No

Name(s):  ________________________________ Relation to you:  ________________________________

**Emergency Contact:**

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship to you</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Is this person a member of Maple Springs?  [ ] Yes  [ ] No

**CHURCH USE ONLY**

DEACON ASSIGNED:  __________________

DEACONESS ASSIGNED:  __________________

ENVELOPE NUMBER:  ________

Entered MP:  _____/_____/______

Letter Generated:  _____/_____/______

Picture Entered:  _____/_____/______

By:  __________________

By:  __________________

By:  __________________