



## New Member Information

If you have interest in joining Cross of Peace, please fill out this form and return it to an usher or to the church office at your earliest convenience. If you have any questions, contact the church office at 952.445.5479 or email Pastor Stephanie Espinoza: [stephanie.e@crossofpeace.net](mailto:stephanie.e@crossofpeace.net).

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Occupation: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Address: \_\_\_\_\_

Spouse/Partner/Other: \_\_\_\_\_ Birth date: \_\_\_\_\_

Occupation: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

### Children

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

If baptized, date and place: \_\_\_\_\_

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

If baptized, date and place: \_\_\_\_\_

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

If baptized, date and place: \_\_\_\_\_

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

If baptized, date and place: \_\_\_\_\_



**Previous church membership (if applicable):** \_\_\_\_\_

**How were you introduced to our church?** \_\_\_\_\_

\_\_\_\_\_

**Comments or questions:** \_\_\_\_\_

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