

Member Information Update Form

Please complete as much information about yourself as possible, for our church database. This information helps us to serve you better.

Family Details			
Surname:		Date of Marriage:	YYYY / MM / DD
Home Telephone:		Email Address:	
Street Address:		Postal Address	
Home Language:			

Family Member: Parent 1 / Only Family Member			
Surname (if different):		First Name:	
Title:	Mr / Mrs / Dr / Pst / Other	Gender:	Male / Female
Date Of Birth:	YYYY / MM / DD	Marital Status:	Single / Married / Divorced / Other
Have you attended a Gracepoint membership course?	Yes / No	Work Telephone:	
How long have you been worshipping at Gracepoint?		Mobile Telephone:	
Email Address:			
Employer:		Occupation:	
Courses that you have completed:		Small Groups that you belong to:	
Ministry Involvement:		Skills, giftings, interests:	
How would you describe your faith journey at present?			

Family Member: Parent 2			
Surname (if different):		First Name:	
Title:	Mr / Mrs / Dr / Pst / Other	Gender:	Male / Female
Date Of Birth:	YYYY / MM / DD	Marital Status:	Single / Married / Divorced / Other
Have you attended a Gracepoint membership course?	Yes / No	Work Telephone:	
How long have you been worshipping at Gracepoint?		Mobile Telephone:	

Email Address:			
Employer:		Occupation:	
Courses that you have completed:		Small Groups that you belong to:	
Ministry Involvement:		Skills, giftings, interests:	
How would you describe your faith journey at present?			

Family Member: Child 1 (under 18)			
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Surname (if different):		First Name:	
Gender:	Male / Female	Date Of Birth:	YYYY / MM / DD
Mobile Telephone:		Email Address:	
School:		Grade:	
Allergies:		Any other info we need to know about your child?	
Ministry Involvement:		Skills, giftings, interests:	

Family Member: Child 2 (under 18)			
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Surname (if different):		First Name:	
Gender:	Male / Female	Date Of Birth:	YYYY / MM / DD
Mobile Telephone:		Email Address:	
School:		Grade:	
Allergies:		Any other info we need to know about your child?	
Ministry Involvement:		Skills, giftings, interests:	

Family Member: Child 3 (under 18)			
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Surname (if different):		First Name:	
Gender:	Male / Female	Date Of Birth:	YYYY / MM / DD
Mobile Telephone:		Email Address:	
School:		Grade:	
Allergies:		Any other info we need to know about your child?	
Ministry Involvement:		Skills, giftings, interests:	

