



Lutheran Church of the Palms  
 2250 Nebraska Avenue  
 Palm Harbor Florida 34683  
 727.784.4119  
 www.LutheranChurchOfThePalms.org

## NEW MEMBER INFORMATION

### About you and, if applicable, your spouse

Last Name	First Name	Birth Date	Baptism Date	Confirmation Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Wedding Anniversary Date: _____				

### Please list dependent children living with you:

Last Name	First Name	Birth Date	Baptism Date	Confirmation Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

### Contact Information

Street Address _____	City / State / Zip _____	
email address _____	primary phone _____	secondary phone _____

### Other Information

Congregation transferring from: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
 Name and contact information

### Your Gifts

What are your gifts? How would you like to serve our Lord at Lutheran Church of the Palms?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Background

Please use back of this form to let us know a little more about you.