

**Zion Hope Church**  
**MEMBER INFORMATION FORM**



**Please Print**

**Name**

Title First Last Suffix, Jr., II etc

**Mailing Address**

Street  
  
 City State Zip

Confidential

**Home Phone**

(XXX) XXX-XXXX

**Cell Phone**

(XXX) XXX-XXXX

check if you want numbers unlisted

**E-Mail Address**

check if you want email unlisted

**Birthday** (xx/xx/xxxx)

**Anniversary** (xx/xx/xxxx)

Single  Married  Divorced  Widow  Widower

**Emergency Contact Name**

**Emergency Contact Phone**

(XXX) XXX-XXXX

**Spouse Name**

Title First Last Suffix, Jr., II etc

**Cell Phone**

(XXX) XXX-XXXX

**Other Phone**

(XXX) XXX-XXXX

check if you want numbers unlisted

**Spouse Birthday**

(xx/xx/xxxx)

**Spouse E-Mail Address**

check if you want email unlisted

**Children's Names & Birthdays**

(only children at home & attending church) (xx/xx/xxxx)

(If child is over 18 & lives at home they should complete a form for themselves and provide your address)

First	Last (if different)	Birthday (xx/xx/xxxx)
<input type="text"/>	<input type="text"/>	<input type="text"/>

Member:  Yes  No

<input type="text"/>	<input type="text"/>	<input type="text"/>	Member: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="text"/>	Member: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="text"/>	Member: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="text"/>	Member: <input type="checkbox"/> Yes <input type="checkbox"/> No

Member:  Yes  No

Member:  Yes  No

### Medical Needs

Allergies, list member's name with each

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Special Conditions, list member's name with each

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Medications, list member's name with each

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### Skills & Talents

Circle all that applies & indicate member's name

	Member's Name	Member's Name
<b>Carpentry/Painter/</b>		
<b>Computer Repair/Technology</b>		
<b>Custodian</b>		
<b>Desktop Publishing/Computer Software</b>		
<b>Event Planner/Organizer</b>		
<b>Instructor/Trainer</b>		
<b>Instrument/Singing/Conductor/Sound Tech /Dancer</b>		
<b>Photography/Video</b>		
<b>Plumbing/Electrical/HVAC</b>		
<b>Sewing/Crafts/Creative</b>		
<b>Socializing/Likes to Talk on phone</b>		
<b>Typing/Filing/Sorting/Database</b>		
<b>Social Media / Webpage Design</b>		