



PEACE LUTHERAN CHURCH
Individual Request for Information
 (Please complete a form for every individual in your household.)

Today's Date
 Change, as noted

Last Name _____

Legal First Name _____

Goes by _____
(ex. Sue, for Susan)

Middle _____

Title _____ Suffix _____
See options on back. Jr. Sr. I. II. or III.

Family Position: Primary Contact Spouse
 Child Other

Gender: Female Male

Date of Birth _____ Required
Month / Day / Year (ex. 01/01/2001)

Marital Status Single Married Widowed
 Divorced Separated

Wedding Anniversary Date _____
Month / Day / Year (ex. 01/01/2001)

Allergies _____ None

Giving Number _____

Preference Electronic Giving Offering Envelopes

Email _____

Cell Phone _____

Mobile Carrier _____ Texts Okay

Home Phone _____

MAILING ADDRESS

Street _____

City / State / Zip _____

Alternate Address Summer Winter College None

City / State / Zip _____

Occupation _____
 Retired, please note above occupation retired from above

Student (PK-Grade 12)

School _____

Grade _____ or High School graduation year _____

Emergency Contact *(not member of household)*

Name _____

Relationship _____

Address _____

City / State / Zip _____

Phone _____

Newsletter Email Mail None

Ethnic Origin (Requested by our denomination, ELCA)
 (additional information on back of this sheet)
 African American African National/African-Caribbean
 American Indian/Alaskan Native
 Arab/Middle Eastern Asian/Pacific Island Latino/Hispanic
 Multiracial White/Caucasian Other

Thrivent Financial Member? Yes No

Service(s) You Usually Attend:
 Saturday 5:30 pm Sunday 8:30 am Sunday 10:00 am

Military Service Active Retired Reserve
 Air Force Army Coast Guard Marines Navy None

How you heard about PLC
 Friend Yellow Pages Sign Mailer Internet _____

Previous Church

Name City, State
 ELCA Other Lutheran Non Lutheran
 Member No Yes, please transfer my membership. Associate

PLC Member Start Date _____ Received in Worship (ex. 01/01/2001)

Significant Events

Baptism Date _____
(ex. 01/01/2001; estimate okay)

First Communion Date _____
(ex. 01/01/2001; estimate okay)

Confirmation Date _____
(ex. 01/01/2001; estimate okay)

College Graduation _____
(ex. 01/01/2001; date of last class)

Growing Disciples _____
(ex. 01/01/2001; date of last class)

Notes

Peace Lutheran Church

18265 North 89th Avenue, Peoria, AZ 85382-3000
623-972-6785 office@peaceaz.org

Explanation of Form Fields

A form should be completed for each member of your household. Please feel free to contact the church office if you have *any* questions regarding this form.

Last Name

Individual's Last Name

Legal First Name

Full official first name

Goes by

The name the individual goes by or wishes to be called.

Ex. Richard may go by Dick or Rick. Patricia may go by Patty Jane

Middle

Full official middle name

Title Options

Dr. Miss Mr.

Mrs. Ms. Rev.

Suffix Options

I II II

Jr. Sr.

Date of Birth

Must be filled in xx/xx/xxxx

Wedding Anniversary Da

Please include month, day & year xx/xx/xxxx

Allergies

Specifically, food allergies (such as peanuts) or medical (such as sulfur).

Giving Number

Note your giving number if you already have one. If not, would you prefer online giving or to receive offering envelopes?

Email, Phones, alternate Address

Please give this additional information to help us communicate with you.

If you will accept text messages from PLC and group leaders, please note your mobile provider.

Occupation

Your job title/vocation If retired, check box AND list occupation retired from

Student

If student in grade PK-12, please note school attending and either current grade or year will graduate from high school.

Emergency Contact

If something happens to you or a member of your household at church, who do we contact when someone in your household cannot be reached?

Do *not* list spouse; if you fill out paperwork completely, we already will have all their information on file to contact first.

Newsletter

Let us know how you would like to receive our monthly newsletter.

Ethnic Origin

This information is strictly for reporting demographics annually to the ELCA. *If Other, please list.*

Thrivent Member, Service Usually Attend, & Military

Help us to know you better and to honor your participation as part of these groups.

How you heard about Peace

We're curious. What brought you to Peace?

Previous Church

If you come from another faith community, please provide that information.

Significant Dates: Baptism, First Communion, & Confirmation

Very important to list these dates if they apply. If you are unable to locate the information, please guesstimate and call the church office with specific date when you locate it. x/xx/xxxx