



Information Request Sheet

GENERAL INFORMATION

Date _____ 20 ____ Prefix: Mr. Mrs. Ms. Miss. Dr. Bro. Sis. None

Full Legal Name _____

Name You go by _____ Are you a Jr. Sr. I II III

Ethnicity White/Caucasian Black/Afro-American Hispanic Asian Indian/Native American Other

Sex Male Female Birthday ____/____/____(Month/Day/Year)

Mailing Address _____

Street Address _____

City _____ State _____ Zip Code _____

Home: Phone (____) _____ 2nd Line (____) _____ Fax (____) _____

Cell (____) _____ Voice Mail (____) _____ TTY/TDD (____) _____

Web Page _____

Email address _____

How you heard about the Church? Invited by Friend/Family Direct Mail (anything mailed) Yellow Pages

Newspaper Website Television Special Event Outdoor Signs Small Groups Radio Ads

Church or Denomination you came from before you came to this church? _____

Hobbies Camping Basketball Softball Volleyball Raquetball Tennis Golf Biking

Computing Gardening Paintball Other _____

EDUCATION

Level of Education GED High School Grad Some College Tech School College Graduate
 Masters Degree Doctorate Professional Degree

Schools Attended _____

Training Certificates CPR Training CPR Instructor Commercial Drivers License SCUBA Diving

Plumber Nursing Electrician Other: _____

WORK INFORMATION

Occupation _____

Place of employment _____

Work phone (____) _____ Pager (____) _____

MARITAL INFORMATION

Status Single Widowed Married Divorced Engaged Separated

If married, anniversary date ____/____/____(Month/Day/Year)

Spouse's Name _____

CHILDREN INFORMATION

Home Status Married with Children at Home Married without Children
 Single (No Children at Home) Married with Grown Children Single Mom Single Dad

	Legal name	Name child goes by	Birthday - (Mth, Day & Yr.)
Child 1	_____	_____	_____
Child 2	_____	_____	_____
Child 3	_____	_____	_____
Child 4	_____	_____	_____
Child 5	_____	_____	_____
Child 6	_____	_____	_____
Child 7	_____	_____	_____
Child 8	_____	_____	_____
Child 9	_____	_____	_____

MINISTRY

Ministries you are currently Serving In at Church: Elder Deacon Nursery Pre-School
 Children's Church Teens Missionettes Royal Rangers Hosting Praise Team Music
 Praise Team Singing Praise Team PA/Sound Praise Team Computer/Projection

In a ministry of the church, if needed how much time would you be able to volunteer at the church?

Not Sure Limited, 1-2 hrs Moderate, 2-4 hrs Significant, 4+ hrs It depends on the need.

PROSPECT

A Friend/Relative that you would like to see coming to Gospel Tabernacle:

Address _____

City _____ State _____ Zip Code _____

Directions to Your Home

From the church, do you live: North South East West

Please write as best you can, the directions to your home. Begin as if you were leaving from the church. Draw a map if you feel it would help.