

Membership Records Worksheet

MemRec 03/25/14

Please Record The

- | | | | | |
|-----------------------------------|---|--|--|-------------------------------------|
| <input type="checkbox"/> Blessing | <input type="checkbox"/> Baptism-Confirmation | <input type="checkbox"/> Marriage | <input type="checkbox"/> Legal Relationship | <input type="checkbox"/> Ordination |
| <input type="checkbox"/> Adoption | <input type="checkbox"/> Legal Name Change | <input type="checkbox"/> Divorce | <input type="checkbox"/> Civil Union | <input type="checkbox"/> Death |
| <input type="checkbox"/> Transfer | <input type="checkbox"/> Address Update | <input type="checkbox"/> End/Termination | <input type="checkbox"/> Covenant-Commitment | <input type="checkbox"/> Friend |

Of _____
 (Last) (First) Middle) Membership No. _____

Birthdate: _____ Birth Place: _____
 (City) (State) Male Female

Single Partnered Divorced Married Widowed
 Spouse Name: _____ Member: Yes No

Address 1: _____ Home Phone: _____
 Address 2: _____ Mobile Phone: _____
 _____ (City) _____ (State) _____ (ZIP) Email: _____

Baptism, Marriage, Civil Union, Legal Relationship, Covenant-Commitment, Divorce, End, Termination, Name Change, or Death (circle one) **Blessing, Confirmation, Adoption or Ordination (circle one)**

Date: _____ Date: _____
 Location: _____ Location: _____
 Officiant: _____ Officiant: _____
 New Legal Name: _____ Officiant: _____

Place of ENROLLMENT or TRANSFER

Transfer to or Enroll in: _____
 (Congregation Name)

Transfer from or Now Enroll in: _____
 (Congregation Name)

ORDINATION

The person shown at the top of this report was ordained to the priesthood office of: _____

ADDITIONAL DATA for ADOPTION, BAPTISM or BLESSING REPORT

FATHER Natural Adopted Foster Step Community of Christ: Member Yes No

Full Name: _____

Birthdate: _____ Birth Place _____ Membership No. _____

MOTHER Natural Adopted Foster Step Community of Christ: Member Yes No

Full Name: _____

Birthdate: _____ Birth Place _____ Membership No. _____

Notes & Comments: _____

Name of Person Reporting: _____ Date: _____

Required Information

Baby Blessing

Full name (first/middle/last)
Birth date
Parents name (when entering a child)
Address
Full name of officiants
Date of blessing
Place of blessing

Baptism and Confirmation

Full name (first/middle/last)
Birth date
Parents name (when entering a child)
Address
Full name of officiants
Date of baptism and confirmation
Place of baptism and confirmation

Marriage, Legal Relationship, Covenant-Commitment, and Civil Union

Full name (first/middle/last)
Birth date
Address
Union date
New last name if it is changing

Divorce, End, and Termination

Full name (first/middle/last)
Birth date
Address
Divorce/End/Termination date
New last name if last name is changing

Address Change

Full name (first/middle/last)
Complete new address
Is address changing for whole family?

Ordination

Full name (first/middle/last)
Address
Full name of officiants
Date of ordination
Place of ordination

Legal Name Change

Previous full name (first/middle/last)
New full name (first/middle/last)
Nickname, if used
Effective date, if court ordered

Transfer

Baptismal number or Shelby ID number
Place transferring to

Death

Full name
Date of death
Place of death

Friend

Full name
Address
Enrolled

Non-Member Parent

Full name
Date of birth
Address
Enrolled
Gender