

## Zion Baptist Church

Please complete the family information section below and the individual section for each person in your family.

### Family Information

**Family name:** \_\_\_\_\_ *i.e. John & Jane Smith*

#### Mailing address

Mailing name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Publish address in directories: Yes No

#### Alternate address:

\_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone number: \_\_\_\_\_

Use this address between \_\_\_/\_\_\_/\_\_\_ and \_\_\_/\_\_\_/\_\_\_

*If you spend part of the year at another location, please let us know the address, phone number, and the dates to use this address.*

#### Family e-mail:

\_\_\_\_\_

Publish e-mail address in directories: Yes No

Send mass e-mails to this address: Yes No

Send contribution statements to this address: Yes No

*If your family shares an e-mail address please enter it here. Individual e-mail addresses will be entered below.*

#### Family web site:

\_\_\_\_\_

**Phone numbers:** Home phone \_\_\_\_\_ Unlisted: Yes No

2nd Hm Phone \_\_\_\_\_ Unlisted: Yes No

Home Fax \_\_\_\_\_ Unlisted: Yes No

**Zion Baptist Church**

**Individual Information**

Family Member 1

**Individual Name:**

Full name:

\_\_\_\_\_

*Title*                      *First name*                      *Middle name*                      *Last name*                      *Suffix*

Preferred name: \_\_\_\_\_

Gender: \_\_\_\_\_

**Individual e-mail:**

\_\_\_\_\_

Publish e-mail address in directories: Yes No

Send mass e-mails to this address: Yes No

Send contribution statements to this address: Yes No

**Individual web site:**

\_\_\_\_\_

**Phone numbers:**

2nd Wk Phone \_\_\_\_\_ Unlisted: Yes No

Emergency Ph \_\_\_\_\_ Unlisted: Yes No

Mobile \_\_\_\_\_ Unlisted: Yes No

Pager \_\_\_\_\_ Unlisted: Yes No

Work Fax \_\_\_\_\_ Unlisted: Yes No

Work Phone \_\_\_\_\_ Unlisted: Yes No

**Envelope number:**

\_\_\_\_\_

**Occupation:**

\_\_\_\_\_

**Moved from:**

\_\_\_\_\_

**Memb. No.:**

\_\_\_\_\_

**Remarks:**

\_\_\_\_\_

**Parents:**

\_\_\_\_\_

**Allergies:**

\_\_\_\_\_

**Medications:**

\_\_\_\_\_

**Conditions:**

\_\_\_\_\_

# Zion Baptist Church

## Individual Information

Family Member 1

<b>Dates:</b>	Birth day:	_____	Married:	_____
	Baptism:	_____	Joined:	_____
	Date 5:	_____	Date 6:	_____
	Date 7:	_____	Date 8:	_____
	Date 9:	_____	Date 10:	_____
	Date 11:	_____	Date 12:	_____

### Marital status:

*Select one of the following values*

Divorced

Married

Single

Widow/Widower

**Zion Baptist Church**

**Individual Information**

Family Member 2

**Individual Name:**

Full name:

\_\_\_\_\_

*Title                      First name                      Middle name                      Last name                      Suffix*

Preferred name: \_\_\_\_\_

Gender: \_\_\_\_\_

**Individual e-mail:**

\_\_\_\_\_

Publish e-mail address in directories: Yes No

Send mass e-mails to this address: Yes No

Send contribution statements to this address: Yes No

**Individual web site:**

\_\_\_\_\_

**Phone numbers:**

2nd Wk Phone \_\_\_\_\_ Unlisted: Yes No

Emergency Ph \_\_\_\_\_ Unlisted: Yes No

Mobile \_\_\_\_\_ Unlisted: Yes No

Pager \_\_\_\_\_ Unlisted: Yes No

Work Fax \_\_\_\_\_ Unlisted: Yes No

Work Phone \_\_\_\_\_ Unlisted: Yes No

**Envelope number:**

\_\_\_\_\_

**Occupation:**

\_\_\_\_\_

**Moved from:**

\_\_\_\_\_

**Memb. No.:**

\_\_\_\_\_

**Remarks:**

\_\_\_\_\_

**Parents:**

\_\_\_\_\_

**Allergies:**

\_\_\_\_\_

**Medications:**

\_\_\_\_\_

**Conditions:**

\_\_\_\_\_

**Zion Baptist Church**

**Individual Information**

Family Member 2

<b>Dates:</b>	Birth day:	_____	Married:	_____
	Baptism:	_____	Joined:	_____
	Date 5:	_____	Date 6:	_____
	Date 7:	_____	Date 8:	_____
	Date 9:	_____	Date 10:	_____
	Date 11:	_____	Date 12:	_____

**Marital status:**

*Select one of the following values*

- |          |               |
|----------|---------------|
| Divorced | Married       |
| Single   | Widow/Widower |

**Zion Baptist Church**

**Individual Information**

Family Member 3

**Individual Name:**

Full name:

\_\_\_\_\_

*Title                      First name                      Middle name                      Last name                      Suffix*

Preferred name: \_\_\_\_\_

Gender: \_\_\_\_\_

**Individual e-mail:**

\_\_\_\_\_

Publish e-mail address in directories: Yes No

Send mass e-mails to this address: Yes No

Send contribution statements to this address: Yes No

**Individual web site:**

\_\_\_\_\_

**Phone numbers:**

2nd Wk Phone \_\_\_\_\_ Unlisted: Yes No

Emergency Ph \_\_\_\_\_ Unlisted: Yes No

Mobile \_\_\_\_\_ Unlisted: Yes No

Pager \_\_\_\_\_ Unlisted: Yes No

Work Fax \_\_\_\_\_ Unlisted: Yes No

Work Phone \_\_\_\_\_ Unlisted: Yes No

**Envelope number:**

\_\_\_\_\_

**Occupation:**

\_\_\_\_\_

**Moved from:**

\_\_\_\_\_

**Memb. No.:**

\_\_\_\_\_

**Remarks:**

\_\_\_\_\_

**Parents:**

\_\_\_\_\_

**Allergies:**

\_\_\_\_\_

**Medications:**

\_\_\_\_\_

**Conditions:**

\_\_\_\_\_

**Zion Baptist Church**

**Individual Information**

Family Member 3

<b>Dates:</b>	Birth day:	_____	Married:	_____
	Baptism:	_____	Joined:	_____
	Date 5:	_____	Date 6:	_____
	Date 7:	_____	Date 8:	_____
	Date 9:	_____	Date 10:	_____
	Date 11:	_____	Date 12:	_____

**Marital status:**

*Select one of the following values*

- |          |               |
|----------|---------------|
| Divorced | Married       |
| Single   | Widow/Widower |

**Zion Baptist Church**

**Individual Information**

Family Member 4

**Individual Name:**

Full name:

\_\_\_\_\_

*Title                      First name                      Middle name                      Last name                      Suffix*

Preferred name: \_\_\_\_\_

Gender: \_\_\_\_\_

**Individual e-mail:**

\_\_\_\_\_

Publish e-mail address in directories: Yes No

Send mass e-mails to this address: Yes No

Send contribution statements to this address: Yes No

**Individual web site:**

\_\_\_\_\_

**Phone numbers:**

2nd Wk Phone \_\_\_\_\_ Unlisted: Yes No

Emergency Ph \_\_\_\_\_ Unlisted: Yes No

Mobile \_\_\_\_\_ Unlisted: Yes No

Pager \_\_\_\_\_ Unlisted: Yes No

Work Fax \_\_\_\_\_ Unlisted: Yes No

Work Phone \_\_\_\_\_ Unlisted: Yes No

**Envelope number:**

\_\_\_\_\_

**Occupation:**

\_\_\_\_\_

**Moved from:**

\_\_\_\_\_

**Memb. No.:**

\_\_\_\_\_

**Remarks:**

\_\_\_\_\_

**Parents:**

\_\_\_\_\_

**Allergies:**

\_\_\_\_\_

**Medications:**

\_\_\_\_\_

**Conditions:**

\_\_\_\_\_



**Zion Baptist Church**

**Individual Information**

Family Member 4

<b>Dates:</b>	Birth day:	_____	Married:	_____
	Baptism:	_____	Joined:	_____
	Date 5:	_____	Date 6:	_____
	Date 7:	_____	Date 8:	_____
	Date 9:	_____	Date 10:	_____
	Date 11:	_____	Date 12:	_____

**Marital status:**

*Select one of the following values*

- |          |               |
|----------|---------------|
| Divorced | Married       |
| Single   | Widow/Widower |

**Zion Baptist Church**

**Individual Information**

Family Member 5

**Individual Name:**

Full name:

\_\_\_\_\_

*Title*                      *First name*                      *Middle name*                      *Last name*                      *Suffix*

Preferred name: \_\_\_\_\_

Gender: \_\_\_\_\_

**Individual e-mail:**

\_\_\_\_\_

Publish e-mail address in directories: Yes No

Send mass e-mails to this address: Yes No

Send contribution statements to this address: Yes No

**Individual web site:**

\_\_\_\_\_

**Phone numbers:**

2nd Wk Phone \_\_\_\_\_ Unlisted: Yes No

Emergency Ph \_\_\_\_\_ Unlisted: Yes No

Mobile \_\_\_\_\_ Unlisted: Yes No

Pager \_\_\_\_\_ Unlisted: Yes No

Work Fax \_\_\_\_\_ Unlisted: Yes No

Work Phone \_\_\_\_\_ Unlisted: Yes No

**Envelope number:**

\_\_\_\_\_

**Occupation:**

\_\_\_\_\_

**Moved from:**

\_\_\_\_\_

**Memb. No.:**

\_\_\_\_\_

**Remarks:**

\_\_\_\_\_

**Parents:**

\_\_\_\_\_

**Allergies:**

\_\_\_\_\_

**Medications:**

\_\_\_\_\_

**Conditions:**

\_\_\_\_\_

**Zion Baptist Church**

**Individual Information**

Family Member 5

<b>Dates:</b>	Birth day:	_____	Married:	_____
	Baptism:	_____	Joined:	_____
	Date 5:	_____	Date 6:	_____
	Date 7:	_____	Date 8:	_____
	Date 9:	_____	Date 10:	_____
	Date 11:	_____	Date 12:	_____

**Marital status:**

*Select one of the following values*

- |          |               |
|----------|---------------|
| Divorced | Married       |
| Single   | Widow/Widower |

**Zion Baptist Church**

**Individual Information**

Family Member 6

**Individual Name:**

Full name:

<i>Title</i>	<i>First name</i>	<i>Middle name</i>	<i>Last name</i>	<i>Suffix</i>
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Preferred name:

\_\_\_\_\_

Gender:

**Individual e-mail:**

\_\_\_\_\_

Publish e-mail address in directories: Yes No

Send mass e-mails to this address: Yes No

Send contribution statements to this address: Yes No

**Individual web site:**

\_\_\_\_\_

**Phone numbers:**

2nd Wk Phone \_\_\_\_\_ Unlisted: Yes No

Emergency Ph \_\_\_\_\_ Unlisted: Yes No

Mobile \_\_\_\_\_ Unlisted: Yes No

Pager \_\_\_\_\_ Unlisted: Yes No

Work Fax \_\_\_\_\_ Unlisted: Yes No

Work Phone \_\_\_\_\_ Unlisted: Yes No

**Envelope number:**

\_\_\_\_\_

**Occupation:**

\_\_\_\_\_

**Moved from:**

\_\_\_\_\_

**Memb. No.:**

\_\_\_\_\_

**Remarks:**

\_\_\_\_\_

**Parents:**

\_\_\_\_\_

**Allergies:**

\_\_\_\_\_

**Medications:**

\_\_\_\_\_

**Conditions:**

\_\_\_\_\_

**Zion Baptist Church**

**Individual Information**

Family Member 6

<b>Dates:</b>	Birth day:	_____	Married:	_____
	Baptism:	_____	Joined:	_____
	Date 5:	_____	Date 6:	_____
	Date 7:	_____	Date 8:	_____
	Date 9:	_____	Date 10:	_____
	Date 11:	_____	Date 12:	_____

**Marital status:**

*Select one of the following values*

- |          |               |
|----------|---------------|
| Divorced | Married       |
| Single   | Widow/Widower |

Thank you for updating your information with us. Please return this update form to the office.