

Today's Date: \_\_\_\_\_



# Info Form

Please fill out **one** info form **per person** and print clearly!!

Name (First & Last) \_\_\_\_\_ Nickname \_\_\_\_\_ Gender \_\_\_\_\_ Marital Status \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Birthdate (mm/dd/yy) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Home Phone (including area code) \_\_\_\_\_ Cell Phone (including area code) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Would you like to receive Pastor Garylee's weekly email devotion?  Yes  No  Already Receive

If Married, Spouse Name (First & Last) \_\_\_\_\_ Anniversary (mm/dd/yy) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Your Children, Under Age 19, if applicable:  Please check if more information is attached.

FIRST	LAST	GENDER	BIRTHDATE
_____	_____	M / F	____ / ____ / ____
_____	_____	M / F	____ / ____ / ____
_____	_____	M / F	____ / ____ / ____
_____	_____	M / F	____ / ____ / ____

Occupation: \_\_\_\_\_

Name of company: \_\_\_\_\_

### What are your ministry interests that you are not currently involved with? (Please check all that apply)

- Graphic Arts
- Kid's Church
- MacLaren Prison Ministry
- Powerpoint
- Youth
- Men's Ministry
- Holy Grounds Espresso
- C.I. Group Leader
- Prayer School
- Married's Ministry
- Musician
- Altar & Curtain Set-Up
- Other \_\_\_\_\_
- WOW (Women's Ministry)
- Lullaby Ministry
- Nursery
- Usher
- Bookstore
- Host Home (Conferences)
- Parking Lot Attendants
- Video
- Missions
- Door Greeter
- Food Preparation (Special Events)
- College Age
- Other \_\_\_\_\_
- God's Cupboard (Food Distribution)
- Deliver Pastors/Special Guests Coffee
- Church Work Days
- Umbrella Ministry
- Conferences/Special Events
- Hospitality
- Donut Ministry
- Worship Team
- Marketplace (Business Ministry)
- TNT (Wed. Nights)
- PAM (Mature Adults)
- Hosting C.I. Group
- Other \_\_\_\_\_

Please complete other side.....

**What are your Abilities/Skills?** *(Please check all that apply)*

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Accounting/Bookkeeping | <input type="checkbox"/> Actor/Actress      | <input type="checkbox"/> Advertising            | <input type="checkbox"/> Architect            |
| <input type="checkbox"/> Artistic/Artist        | <input type="checkbox"/> Auto Mechanic      | <input type="checkbox"/> Babysitting/Child Care | <input type="checkbox"/> Building Maintenance |
| <input type="checkbox"/> Bus Driver             | <input type="checkbox"/> Carpenter: _____   | <input type="checkbox"/> Carpet Cleaning        | <input type="checkbox"/> Catering/Cooking     |
| <input type="checkbox"/> CD Duplication         | <input type="checkbox"/> Choir Director     | <input type="checkbox"/> Choir Singer           | <input type="checkbox"/> Concrete             |
| <input type="checkbox"/> Coaching               | <input type="checkbox"/> Construction       | <input type="checkbox"/> Computer Programming   | <input type="checkbox"/> Crafts               |
| <input type="checkbox"/> Dancer                 | <input type="checkbox"/> Data Entry         | <input type="checkbox"/> Drafting               | <input type="checkbox"/> Drywall Finishing    |
| <input type="checkbox"/> Editing                | <input type="checkbox"/> Electrician        | <input type="checkbox"/> Dental                 | <input type="checkbox"/> Engineer             |
| <input type="checkbox"/> Entertaining           | <input type="checkbox"/> Events Planner     | <input type="checkbox"/> Financial Planner      | <input type="checkbox"/> Food Service         |
| <input type="checkbox"/> Gardening              | <input type="checkbox"/> General Contractor | <input type="checkbox"/> Graphics               | <input type="checkbox"/> Hospital Visitation  |
| <input type="checkbox"/> Grounds Maintenance    | <input type="checkbox"/> Hosting            | <input type="checkbox"/> Journalist/Writer      | <input type="checkbox"/> Landscaping          |
| <input type="checkbox"/> Interior Design        | <input type="checkbox"/> Decorating         | <input type="checkbox"/> Law Enforcement        | <input type="checkbox"/> Lawyer               |
| <input type="checkbox"/> Language: _____        | <input type="checkbox"/> Lighting           | <input type="checkbox"/> Machinist              | <input type="checkbox"/> Managing             |
| <input type="checkbox"/> Mechanical             | <input type="checkbox"/> Medical            | <input type="checkbox"/> Missionary             | <input type="checkbox"/> Musician: _____      |
| <input type="checkbox"/> Multimedia             | <input type="checkbox"/> Nursing            | <input type="checkbox"/> Office Manager         | <input type="checkbox"/> Painting (artistic)  |
| <input type="checkbox"/> Paramedic              | <input type="checkbox"/> Photography        | <input type="checkbox"/> Plumbing               | <input type="checkbox"/> Public Relations     |
| <input type="checkbox"/> Receptionist           | <input type="checkbox"/> Recruiting         | <input type="checkbox"/> Repairing              | <input type="checkbox"/> Researching          |
| <input type="checkbox"/> Roofing                | <input type="checkbox"/> Sales              | <input type="checkbox"/> Secretarial            | <input type="checkbox"/> Set Construction     |
| <input type="checkbox"/> Set Design             | <input type="checkbox"/> Sign Language      | <input type="checkbox"/> Sound Mixing           | <input type="checkbox"/> Sports Official      |
| <input type="checkbox"/> Systems Analyst        | <input type="checkbox"/> Taxes              | <input type="checkbox"/> Teaching               | <input type="checkbox"/> Transcription        |
| <input type="checkbox"/> Transportation         | <input type="checkbox"/> Tutoring           | <input type="checkbox"/> Video/Television       | <input type="checkbox"/> Web Page Design      |
| <input type="checkbox"/> Writing                | <input type="checkbox"/> Other _____        | <input type="checkbox"/> Other _____            | <input type="checkbox"/> Other _____          |

**What are your personal interests?** *(Please check all that apply)*

- |  |                                      |                                      |                                       |
|--|--------------------------------------|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Basketball                  | <input type="checkbox"/> Hiking      | <input type="checkbox"/> Politics    | <input type="checkbox"/> Sewing       |
| <input type="checkbox"/> Walking                     | <input type="checkbox"/> Swimming    | <input type="checkbox"/> Boating     | <input type="checkbox"/> Board Games  |
| <input type="checkbox"/> Gardening                   | <input type="checkbox"/> Golf        | <input type="checkbox"/> Computers   | <input type="checkbox"/> Scrapbooking |
| <input type="checkbox"/> Volleyball                  | <input type="checkbox"/> Softball    | <input type="checkbox"/> Baseball    | <input type="checkbox"/> Video Games  |
| <input type="checkbox"/> Fishing                     | <input type="checkbox"/> Hunting     | <input type="checkbox"/> Biking      | <input type="checkbox"/> Running      |
| <input type="checkbox"/> Football                    | <input type="checkbox"/> Reading     | <input type="checkbox"/> Camping     | <input type="checkbox"/> Quilting     |
| <input type="checkbox"/> Favorite sports team: _____ | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____  |

**PLEASE RETURN ALL COMPLETED FORMS TO THE BOTTOM FILE OUTSIDE PASTOR CAROLYN'S OFFICE**

Reviewed by: \_\_\_\_\_

Date: \_\_\_\_\_