Church Visitor Information Form

| Last Name: |
|---|
| First Name: |
| Street Address: |
| City, State & Zip: |
| Home Phone: |
| Mobile Phone: |
| Email Address: |
| I would like to receive monthly news by email: \Box Yes \Box No |
| I wish to be contacted: |
| □ By Phone □ By Email □ By Personal Visit □ No Thank You |
| I am: |
| Interested in becoming a member Visiting, but may be interested in becoming a member Seasonal Visitor, but want to be active here |
| Comments: |
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