



Lake Mills United Methodist Church
P.O. 216, 271 E. Prospect St. Lake Mills, WI 53551
920-648-2614 | office@lakemillsumc.org | pastor@lakemillsumc.org

Member Information Form

Contact Details:

Date Joined: _____

Name: _____ **Date of Birth:** _____

Home Phone: _____ **Cell Phone:** _____

E-mail Address: _____ Gender: She/Her He/His

Employer: _____ Occupation: _____

Marital Status: Single Married Divorced Widowed Engaged

Anniversary: _____

Mailing Address: Street or P.O. _____

City, State, Zip: _____

Seasonal Address: Street: _____

City, State, Zip: _____

Dates at this Address: _____

Spouse: _____ **Date of Birth:** _____

Home Phone: _____ **Cell Phone:** _____

E-mail Address: _____ Gender: She/Her He/His

Employer: _____ Occupation: _____

Have you been baptized? Yes No Not Sure

If you have never been baptized, you can be baptized at the time you join or you can arrange to be baptized prior to joining the church.

Joining by: (check one)

- New to church membership Returning to church
- Transfer from another United Methodist Church
- Transfer from another denomination

If transferring: Previous Church name: _____

Church Address: _____



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I am interested in more information about: (check all that apply)

How to Serve:

- Welcoming/Greeting
- Usher
- Music/Choir/Musician
- Youth Ministries
- Liturgist
- Prayer Chain
- Bible Study
- Visitation
- Children's/Nursery

Other: _____

Are there any special needs, circumstances, or concerns that you or your family may have?

Children in Your Household

Name: _____

Date of Birth _____

Grade in School _____

If known, Date of Baptism: _____ Confirmed: Y / N

Name: _____

Date of Birth _____

Grade in School _____

If known, Date of Baptism: _____ Confirmed: Y / N

Name: _____

Date of Birth _____

Grade in School _____

If known, Date of Baptism: _____ Confirmed: Y / N

Name: _____

Date of Birth _____

Grade in School _____

If known, Date of Baptism: _____ Confirmed: Y / N