

CENTER FOR HOPE MINISTRIES

Membership Update Form

****Please complete the form in its entirety for your household****

GENERAL INFORMATION

Date: _____ M/F: _____

Name: _____
First Name Last Name MI

Local Address: _____

City: _____ State: _____ Zip: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Alternative Number: (____) _____

Primary Email: _____ Date of Birth: _____

Employer: _____ Occupation: _____

If a student, name of college/university: _____

Date of Graduation: _____

Watchcare: Yes _____ No _____ Any special needs? (*hearing impaired, handicap, etc*) ___ Yes ___ No

If so, please explain: _____

FAMILY INFORMATION

Marital Status: (please check which applies)

Single: _____ Married: _____ Separated: _____ Widowed: _____ Divorced: _____

If Married, Anniversary Date: _____ Current Years Married: _____

Spouse's Name: _____
First Name Last Name MI

Date of Birth: _____ Is spouse a Citizen of CFH Ministries?: Yes ___ No ___

Spouse email: _____ Employer _____ Occupation _____

Please list children 18 and under who attend CFH Ministries

| Name | Gender | DOB | Relationship | Current Grade | Special Needs |
|------|--------|-----|--------------|---------------|---------------|
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How many people are in your household (including yourself)? _____

When did your household join CFH Ministries? _____

What is your annual household income? Please check the range which applies

| | | |
|---------------------------|---------------------------|----------------------------|
| _____ Under \$10,000 | _____ \$40,001 - \$50,000 | _____ \$80,001 - \$90,000 |
| _____ \$10,001 - \$20,000 | _____ \$50,001 - \$60,000 | _____ \$90,001 - \$100,000 |
| _____ \$20,001 - \$30,000 | _____ \$60,001 - \$70,000 | _____ Over \$100,001 |
| _____ \$30,001 - \$40,000 | _____ \$70,001 - \$80,000 | |

Do you want to be included in a church email distribution list? _____ Yes _____ No

SERVANT LEADER EXPERIENCE

A servant leader is a CFH Citizen who uses his/her skills and talents to assist in meeting the operational demands of CFH Ministries. By knowing your area of expertise and giftings, we can better assess the areas in ministry you would best serve. Please select the roles/task you have previously served in:

➤ Leadership

Pastor _____ *Associate* _____ *Ministry* _____ *Small Group*
/Asst. Pastor: _____ *Minister:* _____ *Elder:* _____ *Deacon:* _____ *Coordinator* _____ *Leader:* _____

➤ Ministry Support

Sunday School _____ *Choir/Worship* _____ *Children/Youth* _____
Teacher: _____ *Team:* _____ *Teacher:* _____ *Nursery:* _____ *Musician:* _____
Sound/Video: _____ *Hospitality:* _____ *Driver:* _____ *Tech:* _____ *Secretary:* _____
Maintenance: _____ *Administration:* _____ *Prayer Min:* _____ *Comm/Web:* _____ *Usher:* _____

Please list other areas of expertise, gifting, and talents: _____

EMERGENCY CONTACT

| Name | Phone Number | Relationship |
|------|--------------|--------------|
|------|--------------|--------------|

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Thank you for your participation!