

Our Saviour's Lutheran Church New Membership Interest Form
Sharing God's Love with All!

Name(s) and Age(s): _____

Address: _____

Phone (Home): _____

(Cell): _____

(Work): _____

Are you baptized? Yes No

If yes, Date(s) and Congregation(s): _____

Did you grow up going to church? Yes No

If yes, name(s) and location(s) of congregation(s)?

[Form continues on other side]

Are you currently member(s) at another congregation? Yes No

If yes, name and location? _____

How did you hear about us? _____

Now what? After you submit this form to the office, you will be contacted to set up a time to meet with Pastor Scott. In the mean time, please pray about your decision to join Our Saviour's congregation. May the Holy Spirit guide you and protect you as you continue the journey of faith!