Grace BFC Adult Information Form

To help us to communicate with you and your family we would ask you to complete all applicable information about yourself, and, if married, about your spouse. **Be sure to SIGN on reverse side** If you have children or teens, please also complete our Children's Information and Permissions Form.

| irst Name Last Name amily Label Name (ex. Mr. & Mrs. James Doe, Jones Far | |
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| rimary Address: | |
| | |
| rimary Email: | |
| econdary Email: | |
| referred Phone: is this i | |
| additional Phone: is this | |
| sirthday (please include year, b | |
| Gender: Male Female | |
| f Married, what is your anniversary date? | |
| allergies | |
| mployer / School | |
| ype of Work / Degree | |
| oo you consider yourself to be a Christian? Yes I | |
| | _ |
| are you a member any church? yes no If yes, | |
| are there any groups or types of ministries you would lik | ke to get more information about? |
| | |
| Vhat are your primary spiritual gifts / skills / areas of mi | inistry you are passionate about |
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| | |
| ad of Household Communications Preferences | |
| id of Household Communications Preferences | |
| Please email me regular updates on upcoming events a | |
| I would like free access to RightNow Media's library of | |
| If the church decides to use text messaging, please incl Which of the following would you regularly use if the c | |
| online directory group messaging churc | • |
| facebook Twitter Instagram Snapchat | |

SPOUSE INFORMATION First Name _____ Last Name ____ Nickname: ____ Primary Email: _____ Secondary Email: Preferred Phone: _____ is this number: ____ Home ___ Cell ___ Work Additional Phone: _____ is this number: ____ Home ___ Cell ___ Work Birthday _____ (please include year, but we will not publish year) Gender: __ Male __ Female Allergies Employer / School _____ Type of Work / Degree _____ Do you consider yourself to be a Christian? Yes No Unsure Are you a member any church? ___ yes ___ no If yes, where: _____ Are there any groups or types of ministries you would like to get more information about? What are your primary spiritual gifts / skills / areas of ministry you are passionate about **Spouse Communications Preferences** Please email me regular updates on upcoming events and prayer requests: ____ yes ____ no If the church decides to use text messaging, please include my cell phone: yes no Which of the following would you regularly use if the church made it available / had a presence there? online directory ____ group messaging ____ church app on your phone ____ online / text giving ____ facebook ___ Twitter ___ Instagram ___ Snapchat ___ Other: ______ **Permissions / Signature** Please include basic information (name, address, phone, email, children's names) in the church directory, both in print and online (online directory requires password)

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