

# Sovereign Joy Community Church

Church Membership Application (Front and Back)

Date \_\_\_\_\_

**Please complete one registration card per family.  
Please continue on the other side if needed. Please print clearly.**

|                            |           |                       |        |                  |
|----------------------------|-----------|-----------------------|--------|------------------|
| M <input type="checkbox"/> |           |                       |        |                  |
| F <input type="checkbox"/> | Last Name | First Name            | Middle | Birthdate        |
| M <input type="checkbox"/> |           |                       |        |                  |
| F <input type="checkbox"/> | Last Name | First Name            | Middle | Birthdate        |
| Street Address             |           | City                  | State  | Zip              |
| Mailing Address            |           | City                  | State  | Zip              |
| Home Phone                 |           | Primary email address |        | Anniversary Date |

### Other Information

|      |  |                                     |
|------|--|-------------------------------------|
| Name | Personal Email Address (indicate home or work) | Other Phone (Indicate work or cell) |
|      |  |                                     |
|      |  |                                     |
|      |  |                                     |

### Children at Home

|                            |           |            |        |           |     |
|----------------------------|-----------|------------|--------|-----------|-----|
| M <input type="checkbox"/> |           |            |        |           |     |
| F <input type="checkbox"/> | Last Name | First Name | Middle | Birthdate | Age |
| M <input type="checkbox"/> |           |            |        |           |     |
| F <input type="checkbox"/> | Last Name | First Name | Middle | Birthdate | Age |
| M <input type="checkbox"/> |           |            |        |           |     |
| F <input type="checkbox"/> | Last Name | First Name | Middle | Birthdate | Age |
| M <input type="checkbox"/> |           |            |        |           |     |
| F <input type="checkbox"/> | Last Name | First Name | Middle | Birthdate | Age |

### Please Check All That Apply

- |   |   |
|---|---|
| <input type="checkbox"/> I/We are interested in membership at SJCC.<br><input type="checkbox"/> I/We would like more information about SJCC.<br><input type="checkbox"/> I/We would like to meet with a Pastor or Elder<br><br><input type="checkbox"/> I/We choose to Opt Out of email communications (see note below) | <input type="checkbox"/> Please <b>do not</b> include my/our information in the SJCC church directory.<br><input type="checkbox"/> Please <b>include</b> my/our information in the SJCC church directory. |
|---|---|

**Note:** SJCC may periodically send emails to the email addresses listed above regarding church events/news and other information such as the church directory. If you do not want to receive emails from SJCC, please check the OPT OUT option above.

