



Membership Form

PLEASE PRINT.

Date: _____

HOUSEHOLD INFORMATION

LAST NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

Please list your name(s) as they should appear on official church communications:

(i.e. Mr. and Mrs. Joe Brown; Joe & Susan Brown; Joe Brown & Susan Smith, Mrs. Joseph Brown)

INDIVIDUAL INFORMATION

Adult #1

male female

Full Name: _____ Nickname: _____ Birthdate: _____

Are you baptized? yes no *If yes, year of baptism:* _____

Phone: _____ landline mobile E-mail: _____

We will include your e-mail in our weekly e-blast and occasional special notices unless you opt-out by checking this box.

Adult #2

male female

Full Name: _____ Nickname: _____ Birthdate: _____

Are you baptized? yes no *If yes, year of baptism:* _____

Phone: _____ landline mobile E-mail: _____

We will include your e-mail in our weekly e-blast and occasional special notices unless you opt-out by checking this box.

Please include information about children living in your household on the reverse side of this form.

Joining Christ Church Fox Chapel

By completing and returning this form, you affirm your desire to be an active participant in the life of our congregation who commits to Jesus Christ as Lord and savior, the authority of scripture, and the historic creeds; connects in worship, study, and fellowship, cultivating a loving community; and contributes sacrificial gifts of time and money, joining in our mission to share the gospel wherever we are.

Many people want to recognize their membership publicly in some way.

Listing in service materials Baptism/Reaffirmation/Confirmation/Reception* Profession of Faith/Testimony*

Please continue to reverse side.

Child #1

male female

Full Name: _____ Nickname: _____

Birthdate: _____ Grade in school: _____

Is this child baptized? yes no *If yes, year of baptism: _____*

Is this child confirmed? yes no *If yes, year of confirmation: _____*

Child #2

male female

Full Name: _____ Nickname: _____

Birthdate: _____ Grade in school: _____

Is this child baptized? yes no *If yes, year of baptism: _____*

Is this child confirmed? yes no *If yes, year of confirmation: _____*

Child #3

male female

Full Name: _____ Nickname: _____

Birthdate: _____ Grade in school: _____

Is this child baptized? yes no *If yes, year of baptism: _____*

Is this child confirmed? yes no *If yes, year of confirmation: _____*

Child #4

male female

Full Name: _____ Nickname: _____

Birthdate: _____ Grade in school: _____

Is this child baptized? yes no *If yes, year of baptism: _____*

Is this child confirmed? yes no *If yes, year of confirmation: _____*

GIVING

There are a number of ways to support Christ Church financially. Givers will receive quarterly statements as well as a year-end summary.

1. Online bill pay

Using your financial institution's online banking services, you direct them to send us a check on a schedule determined by you.

2. Electronic Giving

Visit our website or text "ccfcgive" to 833-657-4690 to set up a recurring giving schedule.

3. Stock transfers

Contact the office for account information and to advise of an upcoming transfer.

4. Offering Box

The Offering Box is located in the lobby. Checks and cash are gladly accepted. If you would like cash to be recorded in your giving account, please place it in an envelope with your name.

- I will submit my intention of giving electronically by visiting www.christchurchfoxchapel.org/givingform
- I would like to receive an Intention of Giving card to make a pledge