

Personal Information (All information entered will be held in confidence)

Name _____ Date of Birth _____

Address _____

Home _____ Work _____ ext # _____

Mobile _____ Email _____

Other #'s _____

Occupation _____ Normal work hours _____

Marital status Single Married Divorced

Ministry Information

How long have you attended Calvary San Diego? _____

What other ministries do you participate in? _____

Who is your home fellowship leader? _____

How long have you been attending? _____

Please circle all services you regularly attend?

Weekend: **SAT SUN: 1ST 2ND 3RD PM** Midweek: **TUE WED**

Please list all services you would be available to serve. 1. _____ 2. _____ 3. _____

Pastor or Leader at CCSD who knows you:

Have you attended another church prior to attending CCSD? Yes No

If so, what is the name of the church and the contact information?

Church: _____ Pastor: _____

Phone: _____

Please explain any audio/visual experience you may have: _____

_____ *Continue ...*

