

Friendship Baptist Church Member Profile

Thank you for completing this form carefully and in its entirety. This is critical information for your permanent church records (Please print).

Today's Date: _____ Birth Date: _____

Title _____ Last Name _____ First Name _____ Middle Initial _____

Home Phone: _____ Mobile/Cell: _____

Business/Work: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

EMERGENCY CONTACT: (Please identify at least two people to reach in an emergency):

1. Name: _____ Phone: _____

Relationship: _____ Alternate Phone: _____

2. Name: _____ Phone: _____

Relationship: _____ Alternate Phone: _____

Marital Status: () Single () Married Spouse's Name: _____

() Separated () Single Again () Widowed

Date Joined Friendship: _____

Method: Baptism () Christian Experience () Letter () Restoration/Reinstatement ()

Employer: _____ Occupation: _____

Please list the children living with you:

1. _____ Grade () Age () Male () Female ()

2. _____ Grade () Age () Male () Female ()

3. _____ Grade () Age () Male () Female ()

Please list any other family members/individuals living with you:

1. _____ Relationship: _____ FBC Member (Y) or (N)

2. _____ Relationship: _____ FBC Member (Y) or (N)

Do you have other members of your family who are currently members of Friendship Baptist Church? ()No ()Yes, if so please list them and your relationship to them:

_____ Relationship: _____

_____ Relationship: _____

_____ Relationship: _____

_____ Relationship: _____

TALENTS/SKILLS (Work/life experience and education):

- | | |
|--------------------------------------|-----------------------------|
| () Administration | () Music/Singing |
| () Artist | () Musical Instrument |
| () Budgeting/Finance | () Photography |
| () Building/Home Repair/Maintenance | () Recreation/Sports |
| () Clerical/Office Work | () Skilled/Prof Trade |
| () Communications/Media | Specify: _____ |
| () Computer Entry/Repair/Software | () Sound System Technician |
| () Cooking | () Teaching |
| () Counseling | Subject Matter: _____ |
| () Crafts | () Tutoring: |
| Specify: _____ | Subject Matter: _____ |
| () Gardening/Landscaping | () Writing |
| () Health Field | () Other - Specify: |
| Specify: _____ | _____ |
| () Hobbies | _____ |
| Specify: _____ | _____ |
| () Mentoring | |

INTERESTS: (Issues around which you have a concern/passion) Check all that apply.

- | | |
|---|-----------------------|
| () Community Outreach | () Parenting |
| () Education | () Political |
| () Health | () Social |
| Specify area e.g. nutrition, exercise, etc. | Specify: _____ |
| _____ | () Youth Development |
| _____ | () Other – Specify: |
| | _____ |
| () Legal Issues | _____ |
| () Literacy | |

PREVIOUS CHURCH WORK: (Please list the ministry and what you did.)

MINISTRY	WORK DESCRIPTION

God’s mission for the church is so large that it calls for every one of us to do something. We want you to join boldly with the Holy Spirit’s work by checking the boxes beside the ministries/activities where you sense God is calling you to serve.

- | | |
|--|--|
| <input type="checkbox"/> Altar Guild | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Announcement Clerk | <input type="checkbox"/> Scholarship Committee |
| <input type="checkbox"/> Audio/Video Ministry | <input type="checkbox"/> Senior Ministry |
| <input type="checkbox"/> Children/Youth Church | <input type="checkbox"/> Transportation Ministry |
| <input type="checkbox"/> Greeters | <input type="checkbox"/> Usher Board |
| <input type="checkbox"/> Laymen League | <input type="checkbox"/> Vacation Bible School |
| <input type="checkbox"/> Missionary Society | <input type="checkbox"/> Youth Ministry |
| <input type="checkbox"/> Music Ministry | <input type="checkbox"/> Other – Specify |
| <input type="checkbox"/> New Member Welcome | _____ |
| <input type="checkbox"/> Nurses Guild | _____ |

Please return your completed member profile to the Friendship Baptist Church Trustee Office.