



Date _____

WELCOME to Good Shepherd as you join in partnership with us! Often, it is through the church community that strong friendships develop and we are anxious to get to know you and help you feel at home. To help begin this process, please fill out the following as completely as possible. Thank you, and again, we are glad to have you partner with us.

Your Information:

Name (including prior and/or maiden name)

Date of Birth

Mailing Address (Street)

Mailing Address (City, State, Zip)

Email Address

Home Phone

Employer

Work Phone

Former Church Name (if applicable)

Former Church (Street)

Former Church (City, State, Zip)

Spouse Information (if applicable):

Name (including prior and/or maiden name)

Date of Birth

Mailing Address (Street)

Mailing Address (City, State, Zip)

Email Address

Home Phone

Employer

Work Phone

Former Church Name (if applicable)

Former Church (Street)

Former Church (City, State, Zip)

form continued on the other side...

For office use:

Date Transfer Requested _____

Added to ICON: _____

Envelope Number _____

Copy to New Member Team _____

_____ Communications _____ Online Giving

Children joining with you (if applicable):

Name _____

Date of Birth _____

Grade _____

Name _____

Date of Birth _____

Grade _____

Name _____

Date of Birth _____

Grade _____

Name _____

Date of Birth _____

Grade _____

Interests I have that I would like to offer to GSLC for service and mission.

Friends or Relatives at GSLC.

Send me information for Online Giving.

Send me the newsletter/updates/
correspondence via email.

Printed forms can be delivered to:

Mail:
Good Shepherd Lutheran Church
106 Osage Ave
Bismarck, ND 58501

Or emailed via the submit button