

 **Unitarian Universalist Santa Fe New Member Registry** 

This form will provide the congregation with important information about our new members and allow us to connect you with activities and programs of interest to you.

Today's date: _____

Name(s): _____
First Last

Phone: Home: (____) _____ Work : (____) _____ Cell : (____) _____

Email Address (s): _____

Street Address: _____
Street City State Zip Code

Family Member(s):	Name	Relation	Also joining?	<input type="checkbox"/>	<input type="checkbox"/>
	Name	Relation		YES	NO
	Name	Relation	Also joining?	<input type="checkbox"/>	<input type="checkbox"/>
	Name	Relation		YES	NO
	Name	Relation	Also joining?	<input type="checkbox"/>	<input type="checkbox"/>
	Name	Relation		YES	NO

Tell us more about yourself:

Where are you from? _____

How long in Santa Fe? _____ When is your birthday? _____

Are you: ___Single ___Married or Partnered ___Widowed?

Hobbies and interests _____

What would you say is your area of expertise & would you like to share it with us? ___Yes___No

For membership and office use only

___ new member pkt completed	___ entered in Breeze	___ signed book	___ made pledge
___ written in Joys & Sorrows Book	___ card from Gail	___ book/chalice given	
___ BOT notified	___ Council notified	___ recognized in service	