## \_\_\_\_ Church Visitor Information Form

Last Name:
First Name:
Street Address:
City, State & Zip:
Home Phone:
Mobile Phone:
Email Address:
I would like to receive monthly news by email: ☐ Yes ☐ No
I wish to be contacted:
□ By Phone □ By Email □ By Personal Visit □ No Thank You
I am:
<ul> <li>□ Interested in becoming a member</li> <li>□ Visiting, but may be interested in becoming a member</li> <li>□ Seasonal Visitor, but want to be active here</li> </ul>
Comments: