

Coastal Christian Attendee Sheet

Please help us serve you by keeping all of your contact details current.

(Note: your information can be added or updated online through the Pulse at <http://coastalchristianoc.com/pulse-is-here/>)

PLEASE WRITE LARGE AND LEGIBLY

Household Name: _____
(LAST, FIRST & FIRST) → EXAMPLE: SMITH, JOHN & JANE

Full Given Name: _____
(FIRST, MIDDLE, LAST)

Family Position: (check appropriate box)

- | | | | |
|---|--|---|---------------------------------------|
| <input type="checkbox"/> Single- no children | <input type="checkbox"/> Married – no children | <input type="checkbox"/> Child | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Single with children at home | <input type="checkbox"/> Married with children at home | <input type="checkbox"/> Teenager | _____ |
| <input type="checkbox"/> Single with grown children | <input type="checkbox"/> Married with grown children | <input type="checkbox"/> Widow / -er | _____ |
| <input type="checkbox"/> Single with grandchildren | <input type="checkbox"/> Married with grandchildren | <input type="checkbox"/> Widow / -er with child | _____ |

Birth Date: _____ Wedding Anniversary Date: _____

Mailing Address: _____
 Check here if you wish for your address to not be published to the church directory.

HOME PHONE: _____ CELL PHONE: _____
 Check here if you wish for your HOME phone to not be published to the church directory. Check here if you wish for your CELL phone to not be published to the church directory.

****E-Mail Address:** _____
**key for online access through Coastal Website Check here if you wish for your e-mail address to not be published to the church directory.

Marital Status: Single Married with children Engaged Separated
(check one) Single Mom Married without children Widowed Divorced
 Single Dad Other: _____

How did you hear about Coastal? (check one) Invited by a Friend/Family Special Event Flyers Bible Study
 Online/Website Small Group Signs Radio
 From Church Shopping Other: _____
 By Driving By

Have You Been Baptized? No Yes – Date (or approximate year): _____

Spouse's Full Given Name: _____ Birth Date: _____
(FIRST, MIDDLE, LAST)

Spouse's Cell Phone Number: _____
 Check here if you wish for your spouse's cell phone to not be published to the church directory.

****Spouse's E-Mail Address:** _____
**key for online access through Coastal Website Check here if you wish for your spouse's e-mail address to not be published to the church directory.

1st- Child- Full Given Name: _____ BIRTH DATE _____
(FIRST, MIDDLE, LAST)

2nd- Child- Full Given Name: _____ BIRTH DATE _____
(FIRST, MIDDLE, LAST)

3rd- Child- Full Given Name: _____ BIRTH DATE _____
(FIRST, MIDDLE, LAST)

4th- Child- Full Given Name: _____ BIRTH DATE _____
(FIRST, MIDDLE, LAST)

5th- Child- Full Given Name: _____ BIRTH DATE _____
(FIRST, MIDDLE, LAST)

1st- Grandchild: Full Given Name: _____ BIRTH DATE _____
(THAT ATTENDS WITH YOU) (FIRST, MIDDLE, LAST)

2nd- Grandchild: Full Given Name: _____ BIRTH DATE _____
(THAT ATTENDS WITH YOU) (FIRST, MIDDLE, LAST)

3rd- Grandchild: Full Given Name: _____ BIRTH DATE _____
(THAT ATTENDS WITH YOU) (FIRST, MIDDLE, LAST)