



Please print

startingpoint

GROUP MEMBER REGISTRATION FORM

Name: _____ Birthday*: ____/____/____

Gender: ☐ M ☐ F Marital Status: ☐ S ☐ M ☐ D ☐ W *You must be at least 18 to join a group.

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email (print): _____

Spouse's Name (if applicable): _____

Children's Names & Ages (if 14 yrs & under): _____

Best way to reach me: ☐ Home ☐ Work ☐ Cell ☐ Email

These questions are optional, but your honest response is very helpful.

How did you hear about Starting Point (please mark one)? ☐ a friend ☐ bulletin
☐ video/stage announcements ☐ Sunday message ☐ website ☐ other: _____

Would you identify yourself as a seeker (investigating God and Christianity), starter (beginning a relationship with God), or returner (returning to church and/or a relationship with God)?

Please mark one: ☐ seeker ☐ starter ☐ returner ☐ other: _____

What is your church background, if any? _____

How would you describe your relationship with God? _____

How long have you attended this church? ☐ 0-6 months ☐ 7 months to 1 year ☐ over 1 year

What is your involvement at this church, if any? _____

What do you hope to get out of Starting Point? _____

