

# New Household Form

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Shepherd of the Hills Lutheran  
401 Grizzly Peak Blvd  
Berkeley, CA 94708  
(510) 524-8281

## Household Information

Title: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Unlisted (Circle One): Y N

Household Email: \_\_\_\_\_ Unlisted (Circle One): Y N

## Primary Address

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country: \_\_\_\_\_

## Alternate Address

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Alternate Phone: (\_\_\_\_) \_\_\_\_\_ Unlisted: Y N

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

# New Household Form

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## Member Information Form 1

Title: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Gender (Circle One): Male Female  
Denomination: \_\_\_\_\_ Ethnic Origin: \_\_\_\_\_  
Primary Language: \_\_\_\_\_ Secondary Language: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Cell Unlisted (Circle One): Y N  
Email: \_\_\_\_\_ Email Unlisted (Circle One): Y N

## Special Events

	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
Birth	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
Baptism	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
	Location: _____	Church: _____
	Pastor: _____	Sponsor 1: _____
	Sponsor 2: _____	Sponsor 3: _____
Confirmation	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
	Location: _____	Where: _____
Marriage	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
	Location: _____	Church: _____
Deceased	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
Received by	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
Removed by	Date: ___/___/___ (mm/dd/yyyy)	Location: _____

## Work Information

Work Place: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Work Phone:(\_\_\_\_\_) \_\_\_\_\_ ext: \_\_\_\_\_  
Unlisted Work Phone: Y N  
Work Email: \_\_\_\_\_  
Work Email Unlisted (Circle One): Y N

## Alternate Address

Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Country: \_\_\_\_\_  
Alternate Phone:(\_\_\_\_\_) \_\_\_\_\_ Unlisted: Y N  
Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

# New Household Form

## Member Information Form 2

Title: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Gender (Circle One): Male Female  
Denomination: \_\_\_\_\_ Ethnic Origin: \_\_\_\_\_  
Primary Language: \_\_\_\_\_ Secondary Language: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Cell Unlisted (Circle One): Y N  
Email: \_\_\_\_\_ Email Unlisted (Circle One): Y N

## Special Events

	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
Birth	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
Baptism	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
	Location: _____	Church: _____
	Pastor: _____	Sponsor 1: _____
	Sponsor 2: _____	Sponsor 3: _____
Confirmation	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
	Location: _____	Where: _____
Marriage	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
	Location: _____	Church: _____
Deceased	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
Received by	Date: ___/___/___ (mm/dd/yyyy)	Location: _____
Removed by	Date: ___/___/___ (mm/dd/yyyy)	Location: _____

## Work Information

Work Place: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Work Phone:(\_\_\_\_\_) \_\_\_\_\_ ext: \_\_\_\_\_  
Unlisted Work Phone: Y N  
Work Email: \_\_\_\_\_  
Work Email Unlisted (Circle One): Y N

## Alternate Address

Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Country: \_\_\_\_\_  
Alternate Phone:(\_\_\_\_\_) \_\_\_\_\_ Unlisted: Y N  
Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_