



FIRST CLASS REGISTRATION FORM

PC 21

Confidentiality: All the information you provide will be used only by the pastoral staff in helping to minister to you and your family.

Full Name _____ DOB _____

Spouse Full Name _____ DOB _____

Who is in attendance? Both (circle both or list who is attending): _____

Home Phone (_____) _____

His Cell # (_____) _____ Her Cell # (_____) _____

Mailing Address _____ City _____ Zip _____

Primary Email _____ His Occupation _____

Secondary Email _____ Her Occupation _____

Questions (Circle One)

1. Send correspondence to both email addresses: Yes or No
2. I would like to begin receiving preaddressed giving envelopes: Yes or No or Already Receiving Them
3. I would like information about giving to the church electronically online: Yes or No or Already Do
4. I would like more information about serving in: _____
5. I would like my spouse to received DVDs from the church while he/she is deployed: Yes or No or N/A

Address _____

6. Upon completion of First Class what ABF/SS class will you attend: _____

Membership: Please contact my former church about transferring my membership to BBC.

Name of Church _____

Address _____

Children (who will be attending BBC)

Name _____ DOB _____

Name _____ DOB _____

Name _____ DOB _____

Name _____ DOB _____

Name _____ DOB _____