



**CHURCH MEMBERS DETAILS FORM**

Name of Member: .....

Status: Married  Single  Widow  Widower  Separated

Date of Birth: .....

Gender: Male  Female:

ID Number: .....

Telephone Number 1.....Telephone Number 2.....

Email Address:.....P.O Box.....Code.....

Physical Address:.....Town.....

Estate/ Village: .....

Street/Road: .....

Landmark: .....

Occupation: .....

Number of Children: .....

Name	Age	Gender: Male <input type="checkbox"/>	Female <input type="checkbox"/>
1.....			
2.....			
3.....			
4.....			
5.....			

Next of Kin: .....

Telephone Number:.....

Email Address:.....

ID number: .....

**Prepared By Name:.....Signature .....Date.....**

**Verified By Name: .....Signature.....Date.....**