

GUEST REGISTRATION

(Please place completed form in offering receptacles)

Date: _____

Name: _____

Address _____ City _____ State _____ Zip _____

Phone Number: _____

Email Address: _____

Children:

 Name _____ Age _____

 Name _____ Age _____

 Name _____ Age _____

Please check that all applies:

- First-time visitor
- 2nd time visitor
- 3rd time visitor
- New to area
- Would like to know more about NBCBC
- Would like to join NBCBC

I learned about the church from:

- Signs
- Web/Facebook
- Friends/Family

Age Groups:

- 18-26 36-40 46-55 65+
- 26-35 45-45 56-64