



INFORMATION FORM

Family Last Name _____ Wedding Anniv. Date: ___/___/___

Street Address _____

City _____ State _____ Zip Code _____

Household Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N

Preferred household email _____ Listed: Y/N

Emergency Contact Name _____ Ph #: _____

Relationship _____

Household Members:

1) Name _____ Goes by _____

Circle: Head/Spouse/Child/Other DOB ___/___/___ Gender: M/F

Preferred Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N

Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N

Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N

Preferred Email: _____ Type: H/W Listed: Y/N

Add'l Email: _____ Type: H/W Listed: Y/N

2) Name _____ Goes by _____

Circle: Head/Spouse/Child/Other DOB ___/___/___ Gender: M/F

Preferred Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N

Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N

Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N

Preferred Email: _____ Type: H/W Listed: Y/N

Add'l Email: _____ Type: H/W Listed: Y/N

3) Name _____ Goes by _____

Circle: Head/Spouse/Child/Other DOB ___/___/___ Gender: M/F

Preferred Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N

Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N

Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N

Preferred Email: _____ Type: H/W Listed: Y/N

Add'l Email: _____ Type: H/W Listed: Y/N

Type: H=Home; C=Cell; W=Work

Listed: Y=include in directory/share with others

4) Name _____ Goes by _____
Circle: Head/Spouse/Child/Other DOB ___/___/___ Gender: M/F
Preferred Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Preferred Email: _____ Type: H/W Listed: Y/N
Add'l Email: _____ Type: H/W Listed: Y/N

5) Name _____ Goes by _____
Circle: Head/Spouse/Child/Other DOB ___/___/___ Gender: M/F
Preferred Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Preferred Email: _____ Type: H/W Listed: Y/N
Add'l Email: _____ Type: H/W Listed: Y/N

6) Name _____ Goes by _____
Circle: Head/Spouse/Child/Other DOB ___/___/___ Gender: M/F
Preferred Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Preferred Email: _____ Type: H/W Listed: Y/N
Add'l Email: _____ Type: H/W Listed: Y/N

7) Name _____ Goes by _____
Circle: Head/Spouse/Child/Other DOB ___/___/___ Gender: M/F
Preferred Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Additional Ph #: _____ Type: H/C/W Listed: Y/N Allow Text: Y/N
Preferred Email: _____ Type: H/W Listed: Y/N
Add'l Email: _____ Type: H/W Listed: Y/N