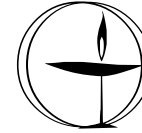




Jefferson Unitarian Church

# Guest Registry



Return this form to the Welcome Table.

→ Please Print

Name(s): \_\_\_\_\_ Phone: \_\_\_\_\_  
First Last First Last

Address: \_\_\_\_\_  
Street (Apt. #) City State Zip

☛ Would you like a complimentary subscription to our newsletter (6 bi-weekly issues)?

\_\_\_\_\_ Yes \_\_\_\_\_ No

☛ May we make you a nametag for your next visit?

\_\_\_\_\_ Yes \_\_\_\_\_ No

☛ How did you find out about JUC?

\_\_\_\_\_ a friend/relative \_\_\_\_\_ drive by/sign \_\_\_\_\_ newspaper  
\_\_\_\_\_ Yellow Pages \_\_\_\_\_ web site \_\_\_\_\_ other

☛ Have you visited our church before? \_\_\_\_\_ Yes \_\_\_\_\_ No

## Children:

If you have children who may be attending our children's program, please give their names and ages below.

\_\_\_\_\_ first last birthdate grade

\_\_\_\_\_ first last birthdate grade

\_\_\_\_\_ first last birthdate grade

*for office use only*

_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

NL ends:  
Nametag:

RE:  
Membership:

Date of first visit:  
VL: