



2017 COMMUNITY UPDATE FORM

(Please complete one per person)

Full Name: _____ Preferred/Nickname: _____

Florida Address: _____

City: _____ State: _____ Zip code: _____

Birth Date: ____/____/19____ Anniversary Date: ____/____/____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Alternate Address: _____

City: _____ State: _____ Zip code: _____

Current Marital Status: Married Remarried Widowed Single Divorced

Please select three **(3)** from the following that best reflect your talents/gifts/passions:

- | | | |
|-----------------------------------------------------|----------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> AV/Tech | <input type="checkbox"/> Finance/Stewardship | <input type="checkbox"/> Office Work |
| <input type="checkbox"/> Communications/Photography | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Small Group Leadership |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Missions | <input type="checkbox"/> Teaching/Preaching |
| <input type="checkbox"/> Evangelism | <input type="checkbox"/> Music | <input type="checkbox"/> Visitation/Chaplaincy |
| <input type="checkbox"/> Greeting/Ushering | <input type="checkbox"/> Other: _____ | |

Former Occupation: _____

Hobbies / Interests / Languages spoken: _____

Where are you from? (Where did you spend significant time and/or where did you grow up?)

Denominational background:

Missionary background, if applicable: (i.e. Countries in which you served)

Military / Christian service background, if applicable: (Branch, Rank, Years served)

THANK YOU for helping us build a community of forgiveness, purpose and hope in Jesus Christ!