## **VISITOR CARD**

Please fill out the information you feel comfortable sharing, then place it in the offering plate or give it to an usher.

	Mr.	Mrs.	Miss	Ms.	Dr.	Other	DATE		
NAME(S)									
ADDRESS	S								
PHONE _				EM	IAIL				
SERVICE	ATTENDI	ED;	8:00 am	10:00 am	n C	other			
НОМЕ СН	HURCH					LOCA	TION		
PLEASE C	CIRCLE AI	LL THAT A	APPLY: Ou	t of town vis	itor Ne	w to commu	nity Intereste	d in member	ship
Would like	e to talk wi	th clergy?	Desire to be	baptized: C	child Ad	ult Wou	ld like to be on:	Mail List	Email List
Ages in ho	ousehold: 0	)-4 5-9 10	)-14 15-17	18-20 21-35	36-45 4	6-55 56-65	5 66-75 76-85	86-95 95-	+
HOW DID	YOU LEA	ARN ABOU	JT ST. STEPI	IEN'S ?	7				



It is a privilege to have you worship with us today. We hope you receive a blessing from being with us Just as we are blessed by your presence. If our staff can help you in any way, please let us know.

Welcome VISITOR