



PO Box 40395  
Austin, TX 78704  
membership@wildflowerchurch.org  
512.428.9464

## ABOUT YOU and INTENT TO JOIN

We're so excited that you want to join Wildflower Church! To become a member, you agree to the following:

- I will participate in the life of the church;
- I will attend a Wildflower Orientation to learn more about the history and life of the church;
- I will make an identifiable contribution of money and pledge support for the current year; and
- I will sign the Membership Book.

Please tell us about your family. Only people over 16 can join as members and must sign this form, but please include your children as well. You may continue on the back of this form.

First Adult Name & Birthday \_\_\_\_\_

Address \_\_\_\_\_  
Street, Unit # City State ZIP

Home Phone, if any \_\_\_\_\_ Include in church directory?  Yes  No

Email \_\_\_\_\_ Include in church directory?  Yes  No

Cell Phone \_\_\_\_\_ Include in church directory?  Yes  No

Emergency Contact and Phone \_\_\_\_\_

Ethnic or Racial Identity \_\_\_\_\_ Gender Identity \_\_\_\_\_

Second Adult Name & Birthday \_\_\_\_\_

Email \_\_\_\_\_ Include in church directory?  Yes  No

Cell Phone \_\_\_\_\_ Include in church directory?  Yes  No

Emergency Contact and Phone \_\_\_\_\_

Ethnic or Racial Identity \_\_\_\_\_ Gender Identity \_\_\_\_\_

Please tell us about the children that live with you:

First Child Name & Birthday \_\_\_\_\_

Ethnic or Racial Identity \_\_\_\_\_ Gender Identity \_\_\_\_\_

Second Child Name & Birthday \_\_\_\_\_

Ethnic or Racial Identity \_\_\_\_\_ Gender Identity \_\_\_\_\_

**(Continue on reverse)**

**Wildflower Church About You and Intent to Join, Page 2**

Third Child Name & Birthday \_\_\_\_\_

Ethnic or Racial Identity \_\_\_\_\_ Gender Identity \_\_\_\_\_

Fourth Child Name & Birthday \_\_\_\_\_

Ethnic or Racial Identity \_\_\_\_\_ Gender Identity \_\_\_\_\_

Fifth Child Name & Birthday \_\_\_\_\_

Ethnic or Racial Identity \_\_\_\_\_ Gender Identity \_\_\_\_\_

Please sign below and leave with the membership table attendant on Sunday or email to [membership@wildflowerchurch.org](mailto:membership@wildflowerchurch.org).

\_\_\_\_\_  
First Adult Signature

\_\_\_\_\_  
Second Adult Signature

Date \_\_\_\_\_