



American Church in Berlin

an ecumenical home for people from diverse nations
sharing God's love in Jesus Christ

Church Office: Leberstr. 7, 10829 Berlin
Tel (030) 813 2021, Fax (030) 813 2845
E-mail: office@americanchurchberlin.de



Membership Information

Name **First** _____ **Middle** _____ **Last** _____

Born on (month/day/year) _____ **Male** ___ **Female** ___ **Profession** _____

Legal Status (check one) ___unmarried ___married ___separated ___divorced ___widow

Significant Dates (Are there any dates you would like the Pastor to remember, e.g. death of a spouse or family member?) _____

Country of Origin _____

Nationality _____

Church Background

Baptized ___yes date (month/day/year) _____ ___no

Confirmed ___yes date (month/day/year) _____ ___no

Communing ___yes ___no

Denomination Background _____ **With ACB since (month/day/year)** _____

Type of ACB Membership ___friend ___member ___alumni

Where did you hear about ACB? ___ads ___events ___JFK ___phone book ___through friends ___US Embassy ___other

If ads, events, or other, which ones? _____

Home Address _____

Zip/City _____

Tel. no. _____ **Fax** _____ **E-mail** _____

Mobile: _____ **Other Phone:** _____ **E-mail-2** _____

May we publish your **home address** and **phone no.** in our Church Directory? (check one) yes ___ no ___

Other permanent (outside of Berlin) address _____

Work Information

Company Name _____

Company Address _____

Tel. No. _____ **Fax** _____ **E-mail** _____

May we publish your **work numbers** in our Church Directory? (check one) yes ___ no ___

Berlin, date _____ **Signature** _____

Children Membership Information

Name First _____ Middle _____ Last _____		
Born on (month, day, year) _____ Male ___ Female ___ Grade Level _____		
Country of Origin _____		
Nationality _____		
Church Background		
Baptized ___yes date (month/day/year) _____ ___no		
Confirmed ___yes date (month/day/year) _____ ___no		
Communing ___yes ___no		
Denomination Background _____ With ACB since (month/day/year) _____		
Type of ACB Membership ___friend ___member ___alumni		

Name First _____ Middle _____ Last _____		
Born on (month, day, year) _____ Male ___ Female ___ Grade Level _____		
Country of Origin _____		
Nationality _____		
Church Background		
Baptized ___yes date (month/day/year) _____ ___no		
Confirmed ___yes date (month/day/year) _____ ___no		
Communing ___yes ___no		
Denomination Background _____ With ACB since (month/day/year) _____		
Type of ACB Membership ___friend ___member ___alumni		

Name First _____ Middle _____ Last _____		
Born on (month, day, year) _____ Male ___ Female ___ Grade Level _____		
Country of Origin _____		
Nationality _____		
Church Background		
Baptized ___yes date (month/day/year) _____ ___no		
Confirmed ___yes date (month/day/year) _____ ___no		
Communing ___yes ___no		
Denomination Background _____ With ACB since (month/day/year) _____		
Type of ACB Membership ___friend ___member ___alumni		