

WELCOME to Faith Assembly!



Is this your first time with us? As our honored guest we have a special gift for you. Please stop by our Welcome Table, located inside the foyer.

Guest Information

Mr. Ms. Mrs. Miss. Dr.

Name: _____

Spouse: _____

Address: _____

City: _____ State/Zip: _____

Phone: _____

Email: _____

Age Group(s)

- Jr. High (6th - 8th)
- Sr. High (9th - 12th)
- 18 - 29
- 30 - 49
- 50 - 69
- 70+

How did you hear about us?

- Internet
- Friend
- Other: _____
- Church Sign
- Word of Mouth

CHILDREN in the home

Names: _____ Ages: _____ Grades: _____

Are you a member of, or attending another church? Yes No

If yes, what church? _____

SERMON NOTES:

Minister: _____

Date: _____

Title: _____



Please complete both sides, tear off, and place in our offering receptacles in the back.

