

## Registration Form

### CONTACT INFORMATION

Name \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City Address \_\_\_\_\_  
 State Address/Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_

### QUESTIONS

How did you hear about the "Shift" Program?

- Friend       Direct Mail       Advertisement in newspaper  
 Poster       Banner       Church announcements/Church personnel

For those new to the Glenview New Church, please describe your primary interest:

- Seeking a new place to worship  
 Interested in Journey Campaign  
 Both

Are you currently attending a church? If so, which one? \_\_\_\_\_

### DEMOGRAPHIC INFORMATION

\_\_\_\_\_ Age range: College age-30, 31-40, 41-50, 51-60, 61-70, 71+  
 \_\_\_\_\_ Marital Status (S, M, D, W)      \_\_\_\_\_ Children

### SMALL GROUP INFORMATION: Please indicate ALL the times that work for you

- Sundays at 10:30 a.m.       Wednesdays at 7:30 p.m.  
 Sundays at 7:30 p.m.       Thursdays at 7:30 p.m.  
 Mondays at 7:30 p.m.       Fridays at 7:30 p.m.  
 Tuesdays at 7:30 p.m.       Weekday afternoon: Best time: \_\_\_\_\_

### OFFICE USE ONLY

Date \_\_\_\_\_

Signed up for a Group

Actions Taken

Person Responding to this Form

- Sent information (specify) \_\_\_\_\_  
 Received Shift Workbook  
 Payment \_\_\_\_\_  
 Other \_\_\_\_\_

Name \_\_\_\_\_  
 Name \_\_\_\_\_  
 Name \_\_\_\_\_  
 Name \_\_\_\_\_

Please return form to:

Glenview New Church

74 Park Drive, Glenview, IL 60025 • 847.724.0057 • www.glenviewnewchurch.org