

Photo Registration Form



Church Directory

A form should be completed for each person in a group photo. Parents can complete form(s) for small children. Skip any information that is redundant or doesn't apply. Please make sure that multiple forms are stapled together.

Name:

-----,-----,-----
Last First MI

Mailing Address:

Number & Street Name

-----,-----,-----
City State Zip Code

Email address we can use to contact you:

-----@-----

Cell # (-----) ----- - -----

Landline # (-----) ----- - -----

Special Dates:

Birthday

-----,-----,-----
Month Day Year (optional)

Anniversary (optional)

-----,-----,-----
Month Day Year (optional)

This information is for NBMC use only and will not be shared with others without your consent.