

NORTHCLIFF UNION CHURCH DATABASE FORM



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Primary Contact

Spouse

NUC member: YES NO Date: _____

NUC member: YES NO Date: _____

Personal information

Surname _____
 Name _____
 Title _____
 Email address _____
 ID Number _____
 Birthdate _____
 Profession _____
 Telephone no (C) _____
 Telephone no (W) _____
 Telephone no (H) _____

Personal information

Surname _____
 Name _____
 Title _____
 Email address _____
 ID Number _____
 Birthdate _____
 Profession _____
 Telephone no (C) _____
 Telephone no (W) _____
 Telephone no (H) _____

Groups/ministries you are involved with at NUC

Cell group - Leader name _____
 Other _____
 Other _____
 Other _____

Groups/ministries you are involved with at NUC

Cell group - Leader name _____
 Other _____
 Other _____
 Other _____

E.g : Women's / Care Team / Youth / Seniors etc.

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Your gifts

Have you done a spiritual gift workshop/assessment
yes **no**
 Please list your spiritual gifts below _____

Your gifts

Have you done a spiritual gift workshop/assessment
yes **no**
 Please list your spiritual gifts below _____

What Skills/Abilities can you offer to NUC to serve God

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E.g : Welcoming /Teaching/Hospitality/Serving/Computers

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Your hobbies

Please list your favourite sport activities and hobbies:

Your hobbies

Please list your favourite sport activities and hobbies:

General Family Information

Marital status

Please tick **SINGLE** **MARRIED** **DIVORCED** **WIDOWED**

Date married _____ Number of children _____

Next of Kin

Name _____
 Relationship _____
 Telephone _____

Your Family residence

Street address _____

 Code _____

Your Family postal details

PO Box Address _____

 Code _____

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Child number 1 (under 18)		Child number 2 (under 18)	
Personal information		Personal information	
Surname	<input type="text"/>	Surname	<input type="text"/>
Name	<input type="text"/>	Name	<input type="text"/>
Email address	<input type="text"/>	Email address	<input type="text"/>
Birthdate	<input type="text"/>	Birthdate	<input type="text"/>
Telephone no (C)	<input type="text"/>	Telephone no (C)	<input type="text"/>
Telephone no (H)	<input type="text"/>	Telephone no (H)	<input type="text"/>
Child number 3 (under 18)		Child number 4 (under 18)	
Personal information		Personal information	
Surname	<input type="text"/>	Surname	<input type="text"/>
Name	<input type="text"/>	Name	<input type="text"/>
Email address	<input type="text"/>	Email address	<input type="text"/>
Birthdate	<input type="text"/>	Birthdate	<input type="text"/>
Telephone no (C)	<input type="text"/>	Telephone no (C)	<input type="text"/>
Telephone no (H)	<input type="text"/>	Telephone no (H)	<input type="text"/>

