Our Savior's Lutheran Church
2124 Viola Rd NE, Rochester, MN 55906
507-289-3021
office Email, office@rochesteroslc.org
Pastor Ben Loven bloven@rochesteroslc.org or Pastor Fred, pf@rochesteroslc.org

Membership Date:_____ __Single __Married

1. **Name**_____
First Middle Last ☐ Home Phone ☐ Cell Phone ☐ Work Phone
Please indicate which you prefer

Address_____
Street City State, Zip

E-mail Address _____

Birth Date_____ **Baptism Date**_____ **Confirmation Date**_____

Occupation_____ **Employer**_____

2. **Name**_____
First Middle Last ☐ Home Phone ☐ Cell Phone ☐ Work Phone
Please indicate which you prefer

E-mail Address _____

Birth Date_____ **Baptism Date**_____ **Confirmation Date**_____

Occupation_____ **Employer**_____

Marriage Date_____

Date Wish to Join_____ **Service Time Preferred,** Please circle one 8:30am 10:00am

Children joining the church at this time	**Birth Date**	**Baptism Date**	**Confirmation Date**
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Most Recent Church Membership--Church_____

Address_____
Street City State, Zip

Emergency Contact

Name_____ **Phone Number**_____

**Please provide the church with a recent picture of your family.