



GENERAL INFORMATION REQUEST

The information request helps us to know to know you better and is kept in strict confidence

Name: _____ Date: _____

Email: _____ Phone: _____

Do you attend Lifecoast Church? **Y or N**

Have you received Jesus as your Lord and Savior? **Y or N**

Service(s) Requested

____ Baby Dedication (See page 2)

____ Wedding (See page 3)

____ Funeral/ Memorial Service (See page 4)

Please print, fill out the desired request and hand it to a pastor or guest services member at our Sunday service

BABY DEDICATION

CHILD'S INFORMATION

Child's Full Name: _____ Gender: ___ Male ___ Female

Date of Birth: ____/____/____

Requested Date for Dedication: _____ Second Option: _____
(Please select dates at least 30 days from submission of this form)

2ND PARENT INFORMATION

Name: _____ Date: _____

Email: _____ Phone: _____

Do you attend Lifecoast Church? **Y or N**

Have you received Jesus as your Lord and Savior? **Y or N**

ADDITIONAL INFORMATION

Due to the spiritual nature of the questions asked during the Baby Dedication Ceremony, it is helpful for the Pastor to understand the marital and living situation of both parents. Our desire is to be as sensitive and loving as possible for everyone concerned; the parents, the extended family but most of all the children.

Which of the following best describes the parents' marital and living situation?

- _____ Married and living together
- _____ Never married and living together
- _____ Not married and not living together
- _____ Divorced
- _____ Separated
- _____ Other: please explain: _____

WEDDING

FIANCE(E) INFORMATION

Name: _____ Date: _____

Email: _____ Phone: _____

Do you attend Lifecoast Church? **Y or N**

Have you received Jesus as your Lord and Savior? **Y or N**

ADDITIONAL INFORMATION

Wedding Date: ___/___/_____ Time: _____

Rehearsal Dinner Date: ___/___/_____ Time: _____

Venue Address: _____

City: _____ State: _____ Zip: _____

Due to the spiritual nature of the questions asked during the 6-weeks of pre-marital counseling, it is helpful for the Pastor to understand the living situation of both bride and groom. Our desire is to be spiritual advisors to inform you of God's best plan for your marriage and your life together.

Are you currently living together? Y or N

Do you agree to 6-weeks of pre-marital counseling? Y or N

Bride Signature: _____ Date: _____

Groom Signature: _____ Date: _____

Do you have a pastor preference? _____

(Please understand that your preferred pastor may not be available on the date and time requested)

FUNERAL

DECEASED INFORMATION

Full Name: _____

D.O.B. : _____

D.O.D. : _____

Did they attend Lifecoast Church? **Y or N**

Had they received Jesus as their Lord and Savior? **Y or N**

ADDITIONAL INFORMATION

Funeral Date: ____/____/____ Time: _____

Venue Address: _____

City: _____ State: _____ Zip: _____

Would your family benefit from a visit from one of our pastors? **Y or N**

Do you have a pastor preference? _____

(Please understand that your preferred pastor may not be available on the date and time requested. We will make every effort to be there for your family during this difficult time)