

The First Unitarian Universalist Society of Syracuse (First UU)

NEWCOMER REGISTRY

Return this form to the Newcomers Information Table

Please Print

Today's Date: _____

Adult 1 Name: _____
 First Last

Cell Phone: _____

Would you like to receive our e-mail newsletter? _____ E-mail: _____

Would you like a nametag printed for future visits? YES NO

Adult 2 Name*: _____
 First Last

Cell Phone: _____

Would you like to receive our e-mail newsletter? _____ E-mail: _____

Would you like a nametag printed for future visits? YES NO

Street Address, Apt #: _____

Landline: _____

City, State Zip _____

Family E-mail: _____

How did you find out about First UU? _____

Have you visited our Society before? _____ If yes, when? _____

Have you attended other UU congregations? _____

If yes, where and when? _____

Children who will be attending our congregation or Lifespan Faith Development*:

First	Last	Birthday	Grade

*If you need space for additional members of your household, please use the back of this form.