



Aldersgate Membership Information

(Please Type or Print)

How mail is addressed to your family:

Names _____

Address _____

May we list your phone # in the church Directory?

Phone _____

Yes No

E-mail _____

Please indicate the church service you most often attend:

Saturday at 5:30 p.m. Sunday at 8:30 9:30 11:00

Adults in the household: (FULL name please)

(Male/female) First Middle Last Preferred or called-by name

Employer Position Work Phone

Date of Birth Martial Status Baptism Date & Church, city, state, if known

Hobbies/interests: _____

(Male/female) First Middle Last Preferred or called-by name

Employer Position Work Phone

Date of Birth Martial Status Baptism Date & Church, city, state, if known

Hobbies/interests: _____

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For Office Use Only:

Date Join: _____ Transferring from: _____

Additional family information may be noted on the next page.



Children in Household:

(Male/female)	First	Middle	Last	Preferred or called-by name
<hr/>				
Date of Birth	Baptized?	Baptism Date & Church, city, state, if known		
<hr/>				
School attending				Grade

(Male/female)	First	Middle	Last	Preferred or called-by name
<hr/>				
Date of Birth	Baptized?	Baptism Date & Church, city, state, if known		
<hr/>				
School attending				Grade

(Male/female)	First	Middle	Last	Preferred or called-by name
<hr/>				
Date of Birth	Baptized?	Baptism Date & Church, city, state, if known		
<hr/>				
School attending				Grade

(Male/female)	First	Middle	Last	Preferred or called-by name
<hr/>				
Date of Birth	Baptized?	Baptism Date & Church, city, state, if known		
<hr/>				
School attending				Grade



Membership Aldersgate United Methodist Church

I (full name) _____

(1) would like to join Aldersgate; (2) joined Aldersgate Church

on (date) : _____ at (select one):

Saturday at 5:30 p.m. Sunday at 8:30 a.m. 9:30 a.m. 11:00 a.m.

I have been baptized: Yes No

If transferring, from:

(Church Name)

(Street Address)

(City, State, Zip)

(Signature of person joining or electronic notation)

Today's Date



Membership Aldersgate United Methodist Church

I (full name) _____

(1) would like to join Aldersgate; (2) joined Aldersgate Church

on (date) : _____ at (select one):

Saturday at 5:30 p.m. Sunday at 8:30 a.m. 9:30 a.m. 11:00 a.m.

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Today's Date