

Welcome to Munholland Methodist Church

We're so glad you've decided to join the Munholland family.
Please complete the form below for our records.

Date: _____

Full Name (titles included): _____ Male or Female

Marital Status (circle one): M S D W Baptized: YES or NO

Phone: Home _____ Cell _____ Email _____

Address _____ City _____ Zip _____

Birthdate: ____/____/____

Employer: _____ Occupation: _____

Is Spouse also requesting membership? YES or NO

Spouse information (if applicable)

Name: _____

Sex: M or F Baptized: Yes or NO

Birthdate: ____/____/____

Phone: Home: _____ Cell: _____ Email _____

Employer: _____ Occupation: _____

Full names of relatives/children living in the household and relationship to you.

Name: _____ Relation: _____ Birthdate ____/____/____ Grade ____

Baptized: YES or NO

Name: _____ Relation: _____ Birthdate ____/____/____ Grade ____

Baptized: YES or NO

Name: _____ Relation: _____ Birthdate ____/____/____ Grade ____

Baptized: YES or NO

Are you attending a Sunday School Class? YES _____

I am attending the _____ Sunday School Class/Small Group

I am joining Munholland Methodist Church by:

- Profession of Faith (First time decision to following Christ)
- Reaffirmation of Faith (Reconnecting with Christ and the Church)
- Transfer from another Denomination
- Transfer from other UMC

Address of Previous Church: _____

I found out about Munholland Methodist Church through _____

Signature: _____ Date: _____