



HERMON MARTHOMA CHURCH, ATLANTA Membership Application Form

Name:

Present Address:

Street

City

State zip

Telephone Number:

Home

Cell

Work

Email Address:

Home Parish:

Permanent Address in India:

Marital Status: Single () Married ()

DETAILS OF THE MEMBERS OF THE FAMILY

<i>Name (first, last)</i>	<i>Relationship¹</i>	<i>D.O.B²</i>	<i>W.A.³</i>
1.
2.
3.
4.
5.

I intend to pay \$..... as my monthly subscription towards the maintenance of the church.

I/We hereby request to become the members of the Hermon Marthoma Church Atlanta. I/We agree to abide by the constitution and practice of the Marthoma Church and subscribe to the faith and practices of the Marthoma Church.

Signature of the Applicant: Date:

I/We/ am/Are interested in participating in the following church activities.

Worship () Choir () Edavaka Mission () Sunday school () Other ()

Membership is only granted after the proper verification of all the information by the Vicar

¹H=husband, W=wife, S=son, D=daughter, SIL=son-in-law, DIL=daughter-in-law, MIL=mother-in-law
FIL=father-in-law, etc., ²D.O.B=Date of Birth, ³W.A=Wedding Anniversary