

**SALEM UMC  
NEW MEMBER INFORMATION**

NAME \_\_\_\_\_  
\_\_\_\_\_

BIRTHDAY \_\_\_/\_\_\_/\_\_\_ BAPTISM DATE \_\_\_/\_\_\_/\_\_\_  
BIRTHDAY \_\_\_/\_\_\_/\_\_\_ BAPTISM DATE \_\_\_/\_\_\_/\_\_\_

ADDRESS \_\_\_\_\_

DATE JOINING SALEM \_\_\_/\_\_\_/\_\_\_

CITY, ST, ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK \_\_\_\_\_ CELL \_\_\_\_\_

EMAIL \_\_\_\_\_

ANNIVERSARY \_\_\_/\_\_\_/\_\_\_

CHILDREN'S NAMES

BIRTHDAY

BAPTISM DATE

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If transferring, name of church you're transferring from: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Pastor: \_\_\_\_\_

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For office use only:

\_\_\_\_ Rolo

\_\_\_\_ PC+

\_\_\_\_ email MC

\_\_\_\_ Charge Conf. list

\_\_\_\_ email to Lisa

\_\_\_\_ Trans Ltr

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