## **Emmanuel Methodist Church**

48-50, Jeremiah Road, Vepery, Chennai 600007

## **Membership Form 2022**

(Please fill the particulars in block letters.)

Name in Full :				
Spouse Name :				
Place and Date of Birth :		Ann	iversary:	
Profession/Occupation :				
		of Dependents	D.A. and alare of Deathers	
No Names of Family Members in Ful	l Sex	Date of Birth	Date and place of Baptism	
Residential Address:				
Office Address :				
Would you like to become a Full Membe ———————————————————————————————————	Father? : ersonal S word? : liness, Go	ethodist Church? :avior?: od being your hel	per?: ir prayers, presence, your	
Will you publicly renew your vows and o	_	•	<del></del>	
	J		0 0	
Date:			Signature	
	For offic	e use		
Date & Minute of PC approval:		Date of Reception:		

Note: Kindly attach Xerox copies of the Baptism Certificate, Confirmation Certificate and Marriage Certificate. (If married)