Mountain View Conference

Membership Changes from Church Clerk

People Wanting to Join Your Church by Letter 1. Name (person requesting transfer)_____ Name of Church Where They Currently Hold Membership_____ __ State_____ Zip Code_____ City 2.. Name (person requesting transfer)____ Name of Church Where They Currently Hold Membership_____ City______ State_____ Zip Code______ **Baptisms and Professions of Faith** 1. Name Address____ Cell_____Email____ Landline _____ Birthdate ___/__/___ (if a child) Grade School _____ Name of parent(s) _____ __Married __Divorced __Single __Widowed Marriage Date ___/____ __M __F Occupation_____ Officiating Minister _____ Date joined _____ Baptism ___ Rebaptism ___ POF 2. Name Address Landline_____ Cell____ Email _____ Birthdate __/_/___ (if a child) Grade_____ School_____ _____ Name of parent(s) _____ __Married __Divorced __Single __Widowed Marriage Date ___/____ __M __F Occupation_____ Officiating Minister Date joined Baptism Rebaptism POF 3. Name Address _____ Cell_____ Email _____ _____ Birthdate ___/__/___ Landline _____ Name of parent(s) _____ (if a child) Grade____ School____ __Married __Divorced __Single __Widowed Marriage Date ___/__/ ___ __M _F Occupation___ Officiating Minister _____ Date joined _____ Baptism ___ Rebaptism ___ POF **Dropped** (due to death, missing or removed only) 1. Name______ Death __Missing __Removed Date __/_/___ _____ Church____ _____ Date___/___