

MONTHLY MEETING RECORD OF MEMBERSHIP

No. _____

NAME (First, Middle, Last) _____

Other name(s) used _____

ADDRESS _____

Change of Address _____

BIRTH Place _____ Date: _____

Name of Parent _____

Other name(s) used _____

Name of Parent _____

Other name(s) used _____

MEMBERSHIP	Kind	Date Begun	Date Terminated
	Junior	_____	_____
	Adult	_____	_____

Received into membership by: Birth Request of parent(s) Personal Application

Certificate of Transfer from (monthly meeting): _____

Letter from _____ (faith community) in _____

Membership terminated by: Death (date and place of burial _____

Resignation Disownment Discontinuance

Certificate of Transfer to (monthly meeting): _____

Letter to _____ (faith community in _____

Date membership terminated: _____

MARITAL DATA Date _____ Place _____

Name of Spouse _____

Names of Spouse's Parents (including other names used, if applicable):

Spouse's Religious Affiliation: _____

Death of Spouse: Date _____ Place of burial _____

Previous/subsequent marriages of member: _____

CHILDREN OF MEMBER

Name _____ Date of Birth _____

Place of birth _____

Additional information (address[es], marriage or other useful information) _____

Name _____ Date of Birth _____

Place of birth _____

Additional information (address[es], marriage or other useful information) _____

Name _____ Date of Birth _____

Place of birth _____

Additional information (address[es], marriage or other useful information) _____

Name _____ Date of Birth _____

Place of birth _____

Additional information (address[es], marriage or other useful information) _____

