## Bethel A.M.E. CHURCH

714 Savannah Street, Mobile, AL 36603 The Rev. Trevor E. Woolridge, Pastor

Date: NEW MEMBER'S INFORMATION FORM		
		THORT OKIM
NAME:First	Initial(s)	Last
Male Female Registere	ed Voter	
ADDRESS:		
Number	Str	eet
City	State	Zip Code
BIRTHDAY: Month	_ Day	Year
MARITAL STATUS: Single	Married	Divorced
Separated	Widow(6	er)
SPOUSE NAME:	ANNIVERSAR	RY: Month Day Year
EMPLOYER:	OCCUPATI	ON:
PHONE NUMBERS: (H)	(W)	
Cell Number:	Cell Phone P	rovider:
Email address:		
Accepted Christ: Yes No		
Have you been baptized?	Yes	No
When did you join Bethel A.M.E. chui	rch?	
I am a member of the following Board	ds – Auxiliaries: _	
Every person 18 or older must comp		m. 17 and younger must be co

## **ADD CHILDREN 17 OR YOUNGER ONLY**

•	Child's full name:			
	Address:			
	Cell Tel:	Cell Provider:		
	Child's Birthday: Month Day	Year		
	Occupation or Student:			
	Child's full name:			
	Address:			
	Cell Tel:	Cell Provider:		
	Child's Birthday: Month Day			
	Occupation or Student:			
	Child's full name:			
	Address:			
		Cell Provider:		
	Child's Birthday:	Year		
	Occupation or Student:			