

## Welcome to First United Methodist Church of Dunedin

We are excited about being in ministry together as we grow in our commitment to Jesus Christ and in our witness beyond the walls of the church.

Please complete the following information and return this form to the church office.

**Member # 1**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

How will you be joining?            ( ) Profession of Faith            ( ) Transfer

Do you desire to be baptized?            ( ) Yes            ( ) No

If transferring, please provide the name, city, and state of the church:

Church Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

**Member # 2**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

How will you be joining?            ( ) Profession of Faith            ( ) Transfer

Do you desire to be baptized?            ( ) Yes            ( ) No

If transferring, please provide the name, city, and state of the church:

Church Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Please indicate the date and preferred service you wish to join

First United Methodist Church of Dunedin:

Sunday \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

( )            9:30 AM   Contemporary

( )            11:00 AM   Traditional

Membership Sunday is the fourth (4<sup>th</sup>) Sunday of each month. If you are unable to join this month, please be sure to indicate the month you in which you prefer to join: \_\_\_\_\_

**\*If you are interested in being baptized or having a child baptized, please contact the church office.**

**First United Methodist Church Membership Profile**

**Class Date:** \_\_\_\_\_

Service I/We attend: ( ) 9:30 AM Contemporary ( ) 11:00 AM Traditional  
Have long you/family been attending First United Methodist Church of Dunedin? \_\_\_\_\_

**Marital Status:** [ ] Single [ ] Married [ ] Divorced [ ] Widowed  
If married please provide anniversary date: \_\_\_\_\_

Your Full Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Birthdate: \_\_\_\_\_ Baptized? [ ] Yes [ ] No  
Full Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ List in Church Directory [ ] Yes [ ] No

Spouse's Full Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Birthdate: \_\_\_\_\_ Baptized? [ ] Yes [ ] No  
Full Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ List in Church Directory [ ] Yes [ ] No

**Children:**

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_  
Baptized: [ ] Yes [ ] No Church: \_\_\_\_\_ Date: \_\_\_\_\_  
Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_  
Baptized: [ ] Yes [ ] No Church: \_\_\_\_\_ Date: \_\_\_\_\_  
Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_  
Baptized: [ ] Yes [ ] No Church: \_\_\_\_\_ Date: \_\_\_\_\_  
Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_  
Baptized: [ ] Yes [ ] No Church: \_\_\_\_\_ Date: \_\_\_\_\_  
Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_  
Baptized: [ ] Yes [ ] No Church: \_\_\_\_\_ Date: \_\_\_\_\_

What brought you to First United Methodist Church of Dunedin? \_\_\_\_\_  
List an positions held at FUMC of elsewhere: \_\_\_\_\_  
What are some of your interests outside the church, i.e. hobbies and talents? \_\_\_\_\_

What areas of ministry would you like to be involved in? \_\_\_\_\_

[ ] I/We give permission for FUMC Dunedin to use the above information as an introductory statement about me/us in any church publication including their website.  
[ ] I/We give permission for FUMC Dunedin to use my/our email address to send church-related information.

**Membership Office Use Only**

Software: [ ] Member Status [ ] Envelope [ ] Completed

**Membership Roles:**

How joined: [ ] POF [ ] Transfer [ ] Transfer sent for \_\_\_\_\_ [ ] Received [ ] Recorded  
How joined: [ ] POF [ ] Transfer [ ] Transfer sent for \_\_\_\_\_ [ ] Received [ ] Recorded