

WE ARE UPDATING CHURCH RECORDS!

Please complete for EACH member of your family and return to the church office at your earliest convenience.

Make additional copies as needed.

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|--|-------------|
| Name: | |
| Address | |
| City, State, Zip | |
| Birthdate: | |
| Anniversary: | |
| Email Address: | |
| Land Phone#: | |
| Cell Phone#: | |
| Cell Phone Carrier: | |
| Would you like to receive text messages from FUMC? | Yes No |
| Are you a Member of FUMC? | Yes No |
| Would you like information on becoming a member of FUMC? | Yes No |

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| Address | |
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