



# Central United Methodist Church

## Membership Information Record

200 East Marion Street  
Shelby, NC 28150  
704.487.6336  
www.cumcshelby.org

Family Name: \_\_\_\_\_

### Contact Information

Home Mailing Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Home E-Mail: \_\_\_\_\_

### Family Information

Name: \_\_\_\_\_  
First Middle Last Birthday (Month/Day/Year)

E-Mail: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Have you been baptized?  Yes  No

Name: \_\_\_\_\_  
First Middle Last Birthday (Month/Day/Year)

E-Mail: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Have you been baptized?  Yes  No

### Names of Children Becoming Members with You

Name: \_\_\_\_\_  
First Middle Last Birthday School

Have you been baptized?  Yes  No If yes, date of baptism \_\_\_\_\_

Name: \_\_\_\_\_  
First Middle Last Birthday School

Have you been baptized?  Yes  No If yes, date of baptism \_\_\_\_\_

Name: \_\_\_\_\_  
First Middle Last Birthday School

Have you been baptized?  Yes  No If yes, date of baptism \_\_\_\_\_

Name: \_\_\_\_\_  
First Middle Last Birthday School

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### Past Church Experience

Are you currently a member of a church  Yes  No

If yes, Church name: \_\_\_\_\_ City \_\_\_\_\_ State: \_\_\_\_\_

### Church Communications

How would you prefer to receive the weekly church newsletter?  E-Mail  US Mail

### Joining the Church

What date do you prefer to join the church? \_\_\_\_\_

Do you wish to have your child(ren) baptized?  Yes  No

If yes, please list name(s)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Additional Information

I am interested in more information about: (check all that apply)

- Children's Ministry
- Youth Ministry
- Adult Sunday School
- Men's or Women's Studies and Groups
- Other \_\_\_\_\_

I am interested in more information about opportunities to serve: (check all that apply)

- Worship (Usher, greeter, acolyte, audio/video, etc.)
- Music/Choir/Musician (Chancel Choir, Praise Band, soloist, etc.)
- Prayer Ministry
- Children's Ministry (Sunday School Teacher, Nursery, Vacation Bible School, etc.)
- Youth Ministry (Chaperone, Program Leader, etc.)
- Congregational Care (Visitation, bereavement meals, etc.)
- Local/National/Global Missions and Ministries
- Other \_\_\_\_\_

Do you have hobbies, skills or experiences that you would like to share?

If yes, please list them here:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return this completed form to the church office when you are ready to join. A staff member will contact you to make arrangements. Please contact us with any questions you have. You may also visit our website for additional information.