

Holman United Methodist Church
3320 West Adams Blvd - Los Angeles, CA 90008
www.holmanumc.com and 323-703-5868

MEMBERSHIP ENROLLMENT

DATE: _____

☐ Mr. ☐ Ms. ☐ Mrs.

Street Address: _____

Apt. _____

City _____ State _____ Zip _____

Telephone (Home) _____

(Cell) _____

(Email) _____

Former Church: _____

Former Church Address _____

Age: ☐ 18-23 ☐ 24-29 ☐ 30-34

☐ 35-39 ☐ 40-49 ☐ 50-59 ☐ 60+

Occupation: _____

Marital Status (Optional): ☐ Single ☐ Married ☐ Widow

Name of Spouse (Optional): _____

Name(s) and Age(s) of School Age Children: (5 years+)

Name(s) and Age(s) of Children Under 5 years)

Birth Month/Date: _____ Anniversary Date: _____

Date: Baptized _____ Confirmation Date: _____

Areas of Interest:

Music___ Arts___ Social Justice___ Women's Ministry___ Men's Ministry___

Seniors Ministry___ Children/Youth___ Young Adult___ Adult___

Hospitality___ Administrative___ (i.e. Trustees, Finance, Staff Parish)

↓↓↓ OFFICE USE ONLY ↓↓↓

REV. 2021

Membership No. _____

Book No. _____