ST. EPHREM SYRIAC ORTHODOX CHURCH GREATER ORLANDO
(Under the Holy Apostolic see of Antioch and all the East)

MEMBERSHIP FORM

1. Name (In block letters) : .....
2. Address : .....
   .....
3. Telephone No : (Res): ..... (Cell): .....
4. E-mail ID : .....
5. Date of Marriage : .....
6. Name of Home Parish & Diocese : .....
7. Address in India : .....
   .....

8. Family Members:

SI.No	Name	Relationship	Date Of Birth (mm/dd/yy)
1.		Head of the Family	
2.			
3.			
4.			
5.			
6.			

9. Are you a member of any other Syrian Orthodox Church in North America? Yes ☐ No ☐

   If Yes Name and Address.....

Declaration

I/We.....do by solemnly declare my true allegiance to the faith, doctrines and practices of the Holy Syrian Orthodox Church and its supreme head HH the Patriarch of Antioch and all the East and his legitimate successors. By becoming a member of this parish, I/We will abide to the discipline of the parish governed by the constitution and the regulations of the Malankara Archdiocese of the Syrian Orthodox Churches in North America. If I/We will be willfully forfeiting all my rights as a member of this parish.

Signature of the Applicant: ..... Date: .....

OFFICE USE ONLY

SL.No.....

This application is verified by the Board of Trustees Meeting held on.....and is approved/ denied.

Name and Signature of President/ Vice President: .....