## THE BOSTON CARMEL MAR THOMA CHURCH 467 RIVER ROAD, HUDSON, MASSACHUSETTS – 01749

## Application for Membership

(Kindly fill in all relevant information and attach a recent individual / family photograph)

1	Name (BLOCK LETTERS)					
		First	First Middle Last			
2	Address in USA	House Number & Street				
		Town Sta			State	Zip code
3	Telephone	Home				
4	Email					
5	Address in India /	House Number/Name				
		Street/LocalityPost Office				
		District & State			e	Pin Code
6	Name and Address of home					Name
	parish in India /		Street/LocalityPost Of			_Post Office
			District & State Pin			
7	Last parish of which the	Name				
	applicant was a member	Street/LocalityPost Office				
			District & State Pin Code			
8	Marital Status	Married / Unmarried				
9	Date and Place of Marriage					
	(mm/dd/yyyy)					
10	Particulars of Applicant and Members of the Family					
	Name (First Middle	Last)	Relationship	DOB (mm/dd/yyyy)	DOM (mm/dd/yyyy)	Remarks
Α	Traine (1 list limited)	Lusty	Self	DOD (mm/dd/yyyy)	DOTT (mm/dd/yyyy)	Remarks
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I / We wish to become a member of the Carmel Mar Thoma Church in Boston, MA. I declare that I / and my family accept the faith and practices of the Mar Thoma Church and I am / we are willing to abide by the discipline of the Church. Letter from my / our Home / former Parish is attached. (Affidavit regarding church membership is to be attached for Non-Mar Thoma applications). I agree to include my / our name, communication details and my / our special dates along with a photograph in the parish directory. I / My family pledge to contribute \$ per month to support the needs of the Church.						
Date	<b>:</b> :	Œ.	Name & Signat			
(For Church Office use)						
Prayer Group Date, Name & Signature of the Vicar						