Malankara Orthodox Syrian Church Diocese of South-West America

Parish Name:								
Membership Form								
First Name:	me: Last Name:			ame:			Middle Name:	
Nickname: Profess				sion:				
Current Address:								
Home Phone: Cell:							E-mail:	
Date of Birth:	Birth:				Plac	ce of Birth:		
Baptized In (Name & a	ddress	of the Parish):						
Marriage Information						Parents'	Information	
Marital Status:					Fatl	ner's Full Name:		
Date of Marriage:					Mo	ther's Full Name:		
No. of Marriages:					Par	ish Name:		
Married in: (Parish)				Par	ish Address:			
Household Information								
Name Relation A		Age	e DOI		Baptized In (Nam	ne & address of the Parish)		
Name and Address of Previous Parish:								
Letter from previous Parish Vicar attached (Circle one): Yes No								
Explain if the answer above is No								
Declaration: I/we, (a) member(s) of (Parish Name, City, State) which is a								
parish of the Diocese of South West America, a Diocese of the Malankara Orthodox Syrian Church of which the head is the duly								
ordained Catholicose who is the apostolic successor of St. Thomas who brought the Gospel of our Lord Jesus Christ to India, agree to								
abide by the bylaws of the Parish, constitution of the Malankara Orthodox Syrian Church and the pastoral orders of the Catholicose								
and the Diocesan Metropolitan from time to time in order to maintain my/our membership in the Parish and I/we further understand that my/our membership and any official position in the Parish will be automatically forfeited if I/we deviate from this								
official declaration in the future.								
I,, hereby certifies that the information given above is true and complete to my								
best knowledge.								
Applicant's Signature: Date:								
Membership # Effective Date:								
Vicar's Name & Signatu	ıre:							