



St. Andrew By-The-Sea United Methodist Church
NEW MEMBER INFORMATION SHEET

Joining on (Date): _____ Service: _____
I normally attend: 9:00 am, Hilton Head 11:15 am, Hilton Head
 9:00 am, Bluffton 10:30 am, Bluffton

Complete one form for **each ADULT** joining
(Please print clearly)

Last Name _____ First/Middle/Maiden _____

Preferred Name _____

Home Address _____ City _____

State _____ Zip _____ Geographic Location _____

Home Phone _____ Mobile Phone _____

E-mail _____ Fax No. _____

Birth Date: Month _____ Day _____ Year _____ Male Female

Married Single Widow/Widower Anniversary Date: Month _____ Day _____ Year _____

Employer _____ Work Phone _____

Occupation _____

Baptized: Yes No Date Baptized: (Approx. if actual not known) _____

Where Baptized _____

Type of Membership: Full Professing Affiliate Associate Other _____

Method of Joining:

UMC Transfer – Church Name _____

Former Church's address _____

City/State/Zip _____

Other Denomination Transfer – Church Name _____

Former Church's address _____

City/State/Zip _____

Alternate Address (Off Island) _____ City _____

State _____ Zip _____ Date: From _____ to _____

I would like my copy of The Fisherman newsletter : Mailed E-Mailed

Committees you have served on _____

Areas of interest, hobbies, etc. _____

Racial Ethnic Identity

Asian African American/Black Hispanic Native American Pacific Islander White Multi-racial

Office Notes: Confirmed Join date: _____ (Staff initial to show completion) _____