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ETHIOPIAN ORTHODOX TEWAHEDO CHURCH
P. O. Box 28588, San Jose, CA 95159
505 Coyote Road, San Jose, California 95111
Tel: (408) 365 8905

Date Registered: _____
Membership #: _____
Membership Type: New ☐
Renewal ☐
Registered by:_____

Membership Registration Form

Member Information

First Name	Middle Name	Last Name
Baptism Name		
Gender ☐ Male ☐ Female	Marital Status ☐ Married ☐ Single ☐ Widow	

Contact Information

Mobile Phone #	Home Phone #	Work Phone #
email Address		
Mailing Address		
City:	Zip Code:	

Spouse Information

First Name	Middle Name	Last Name
Baptism Name		
Mobile Phone #	Home Phone #	Work Phone #
email Address		

Dependants

Name	Relationship	Baptism Name	ID #

Membership Contribution

Select one

Monthly Contribution $ 40 ☐
Monthly Contribution $ 50 ☐
Monthly Contribution $ 100 ☐
Monthly Contribution $ 150 ☐
Monthly Contribution $ 200 ☐

Other Amount: - $ _____

Are you willing to set up automatic/Direct payment of the above amount from your account?

Yes ☐ **No** ☐

Membership Payment Methods

Bank Account: 046-245700
Routing: 121100782
Web Address: - www.kidusgebriel.or

SIGNED: _____ DATE:_____