North Stelton African Methodist Episcopal Church

123 Craig Avenue, Piscataway, NJ 08854

Rev. Ritney A. Castine - Pastor

New Member Information*

Please complete all information.

Date:	Name:			
Address: (Street, City, ZIP)				
E-mail address:				
Home Phone: Cell Phone:				
XX L DI				
Work Phone:	D:4b. l	Dlaga (situ	-t-t-).	
Birth Date (mm/dd/yyyy): Birth Place (city, state):				
Marital Status (circle one):	Single Married Divorced Sep	parated		
Spouse's First Name:	Spouse's Birth Date:			
Children (list children joining) and Birth Date (mm/dd/yy):				
Occupation(s):	Spouse's Occupation:			
Company/Location (city, state):				
Have you accepted Christ as your personal Savior?		Yes	No Coming I	Now
Have you been baptized?		Yes	No	
If no, would you like to be baptized?		Yes	No	
Method of Baptism?	Sprinkle	Pouring	Immersion	
Are you transferring your membership from another church?		Yes	No	
If yes, name of church, city, state? Pastor's I			me:	
Circle any of the following areas of interest:				
Anna Howard Missionary Society Bible Institute Sunday Campus Christian Education Dept. Class Leaders Ministry Drama Ministry Dynamic Evangelism Ministry Family Times Newsletter James O. Bryant Food Pantry List any special hobbies or interes	Grad Prayer and Care R. E. Burroughs H.E.A.L. Ministry Hospitality Ministry Lay Organization Liturgical Dance Ministry Marketing Ministry Marriage Ministry Men's Fellowship ests that might be helpful to the characteris.	New Jersey Orators Nursery Ministry S. A. S. Reading Enrichment Min. Scholarship Ministry School Prayer Ministry Senior Ushers		Singles Ministry Steward Board Stewardess Board Trustee Board UltiMaIT Youth Ushers Young People Division Women's Ministry
Member Number: Envelope Number:				
Class Leader Assigned:				
Original: Steward Office; Copies to: Church Administration Office/ Class Leader/ Finance Office/ New Discipleship Ministry/ Hospitality				
Ministry/ Ministries of interest				

^{*} All information is kept confidential.