

# Welcome to Our Church

Visitors Kindly Register Your Attendance or Request

Name \_\_\_\_\_

Street Address \_\_\_\_\_

P.O. Box \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

- I am visiting for the first time.
- I visit frequently.
- I am new in the community.
- I would like to know more about Adventist teachings.
- I would like to receive literature or magazine by the Adventists.
- I desire a pastoral visit.
- I want to be baptized as an Adventist Christian.
- I want to join a Bible Class.
- I need prayers for a problem I am having.
- I am a baptized Adventist from another church and want to join this church.

My current Adventist Church is \_\_\_\_\_



## The Person Whose Name is Below:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

- Is ill at home
- Had surgery
- Is a new resident
- Desires baptism
- Wants to participate in ministry in your church
- Has moved to the above address
- Is in the hospital
- Is diagnosed with cancer
- Want's a quarterly
- Desires a pastoral visit
- Wants to participate in ministry in your church
- Has moved to the above address

Submitted by \_\_\_\_\_

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