LA SIERRA UNIVERSITY CHURCH
OF SEVENTH-DAY ADVENTISTS

Membership Information

❒Transfer ❒Address Change ❒Phone

Date_____

Name_____
Last First Middle

Address_____
Street Apt

City_____Zip_____

Phone_____
Home Work

Email_____

Date of Birth_____Occupation_____
Month/Day/Year

❒Single ❒Married ❒Widowed ❒Divorced

Name of Spouse_____

Date of Birth_____Occupation_____

Spouse is ❒Transferring ❒LSUC Member ❒Non-Member

Children

_____Birth date_____

_____ Birth date_____

Friend/relative who would always know your current address

Name_____

_____

Address and/or phone number

Transfer Information

❒Please transfer my membership to La Sierra University Church

My membership is with_____

Address_____

City_____State____Country_____Zip_____