Date of Joining Please i	return filled-out form to Sharon@wellesl	eyvillagechurch.org by	
Wellesley Vil	llage Church New Mer	nber(s) Information	
Full Name(s)			
Name(s) you'd like to go by			
Dr/Rev/Mr/Mrs/Miss/Ms/Mx (Circle)	Birth Date		
Address			
Home phone			
Cell phone(s)			
E-Mail Address(es)			
Would you like to receive our weekly Enews publicate Would you like to receive our weekly "Family Life (a	tion? (Circle one) Yes No (Dividing Church" e-news letter? (Circle)	ircle one) Yes No	
Children's Full Names and Nick Names		Birth Date	Grade
Method of Joining			
Affirmation of Faith: first time joining a Christia			
Reaffirmation of Faith: have belonged to a church			
Letter of Transfer: from a church where member			
Please tell us a little about yourself.	Address		
How long have you lived in the area and/or from whe	ere have you most recently moved?		
What or who drew you to Village Church and what w	vere you seeking?		
What are you finding here?			
What is your profession/vocation and what hobbies o	or interests do you enjoy?		
What gifts and talents could you contribute to the life	e of Village Church?		
What groups or activities would you or members of y	our family like to try at Village Chu	rch?	
Any other information you'd like to share?			

Thank you! We are delighted that you have embraced Village Church as your church home. Last updated November 11, 2021 SF