

Petoskey UMC Friendship Pad (Please fill out completely and pass among your aisle.) **Date** _____

Name _____
Address _____
City _____
State & Zip _____
Phone _____
Email _____

- Please check if this is a new address.
- Please check if this is a summer address.
- This is a new phone number.

FAMILY INFORMATION

Name	Age	Grade
------	-----	-------

_____	_____	_____
_____	_____	_____
_____	_____	_____

- Member
- Non member; attend here regularly
- Visitor: (circle) 1st time 2nd time Occas.
- New Resident.
- Would like to be involved in this church.

How did you hear about Petoskey UMC?

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