



HEAD OF HOUSEHOLD INFORMATION

First Name: _____ Last Name: _____

Date of Birth: _____ Gender: Male Female

Address: _____

City: _____ State: _____ ZIP: _____

Email: _____ Cell Phone: _____

Marital Status: Married Single Divorced Widowed Other _____

Church Member Status:

Member Attendee Visitor Other Approximate Date Started: _____

FAMILY INFORMATION

Spouse First Name: _____ Spouse Last Name: _____

Date of Birth: _____ Spouse Phone Number: _____

Email: _____

Child 1 Name: _____ Date of Birth: _____

Child 2 Name: _____ Date of Birth: _____

Child 3 Name: _____ Date of Birth: _____

Yes, I/we give permission to have our contact information added to the 2025 Southside Methodist Church Directory. (Birthdates will not be included in the paper directory)

No, I/we do not give permission to have our contact information added to the 2025 Southside Methodist Church Directory. (Birthdates will not be included in the paper directory)

75TH ANNIVERSARY EVENTS REGISTRATION



Dinner on the Grounds on Sunday, April 6th

Yes, we will attend!

How many in party? _____

No, we will not attend.



SWM Mixed Bouquet on Saturday, March 29th

Yes, I am interested!

No, I am not interested.



Wednesday Night Dinner & Trivia Game Night on Wednesday, April 2nd

Yes, we will attend!

How many in party? _____

No, we will not attend.



Golf Challenge on Thursday, April 3rd

Yes, I am interested! Please contact me. No, I am not interested.