

Application for Church Membership

St. Nicholas Albanian Orthodox Church

2701 N. Narragansett Avenue
Chicago, IL 60639-1031

Date of Application: _____

Receipt # _____

Last Name		First Name		Middle Name		Date of Birth		Place of Birth	
Home Address			City	State	Zip Code	Home Phone		Cell Phone	
Nationality: (Albanian, Greek, etc.)				Religion: (Eastern Orthodox, Roman Catholic, etc.)					
Employers Name		Position/Title		Address		City	State	Zip Code	
Work Phone		Email Address			Spouse Maiden Name				
Date Married		Church/Parish Married In			Last Parish You Attended				
Signature: _____									

Spouse Last Name		First Name		Middle Name		Date of Birth		Place of Birth	
Nationality: (Albanian, Greek, etc.)				Religion: (Eastern Orthodox, Roman Catholic, etc.)					
Employers Name		Position/Title		Address		City	State	Zip Code	
Work Phone		Email Address			Cell Phone				

Children:

1. Last Name	First Name	Middle Name	Date of Birth	Date Baptized
2. Last Name	First Name	Middle Name	Date of Birth	Date Baptized
3. Last Name	First Name	Middle Name	Date of Birth	Date Baptized
4. Last Name	First Name	Middle Name	Date of Birth	Date Baptized

PLEASE COMPLETE ALL INFORMATION WHICH WILL BE USED FOR OUR MEMBERSHIP DATABASE

For Office Use Only:				
Priest Approval: _____			Date: _____	
Date of Membership: _____		Single Fee: \$ _____	Couples Fee: \$ _____	Over 80: _____