



Immanuel Mar Thoma Church, Houston

12803 Sugar Ridge Blvd, Stafford, TX 77477

(281) 561-9147 | www.immanuelmtc.org

Membership form

Member Details

| | | | |
|------------------|---------------------|------------|----------|
| First Name | Middle Name | Last Name | |
| | | | |
| DOB (dd-mm-yyyy) | September 24 | Email | Nickname |
| Home Phone | | Cell Phone | |

Houston Address

| | | | | | |
|----------|-------------|------|-------|----|----------|
| Street # | Street Name | City | State | TX | Zip Code |
| | | | | | |

Parish Details

| | | |
|-------------------|------|-------|
| Parish Name | City | State |
| Transferring From | | |
| Mother Parish | | |
| Other Parishes | | |

India Address

| | | |
|--------------------|-------|----------|
| Address | | |
| City | State | Zip Code |
| | | |
| Other cities lived | | |

Spouse details

| | | | |
|-----------------|-------------|---------------|------------------|
| First Name | Middle Name | Last Name | DOB (dd-mm-yyyy) |
| SHERLINE | | | |
| Email | Nickname | Contact Phone | |

Parish Details

| | | |
|----------------|------|-------|
| Parish Name | City | State |
| Mother Parish | | |
| Other Parishes | | |

India Address

| | | |
|--------------------|-------|----------|
| Address | | |
| City | State | Zip Code |
| | | |
| Other cities lived | | |

Marriage

| | |
|------------------|-----------------------------------|
| Date of Marriage | JUNE 22ND, 2019 |
|------------------|-----------------------------------|

Voluntary Contribution

| | |
|---|----|
| I shall voluntarily pay a monthly amount to support the parish activities (specify amount in USD) | \$ |
|---|----|

Please see next page for children, parent details and to sign the application.

| Children details | | | | |
|------------------|------------|-------------|-----------|------------------|
| 1 | First Name | Middle Name | Last Name | DOB (dd-mm-yyyy) |
| | | | | |
| | Email | Gender | Phone | |
| 2 | First Name | Middle Name | Last Name | DOB (dd-mm-yyyy) |
| | | | | |
| | Email | Gender | Phone | |
| 3 | First Name | Middle Name | Last Name | DOB (dd-mm-yyyy) |
| | | | | |
| | Email | Gender | Phone | |
| 4 | First Name | Middle Name | Last Name | DOB (dd-mm-yyyy) |
| | | | | |
| | Email | Gender | Phone | |
| 5 | First Name | Middle Name | Last Name | DOB (dd-mm-yyyy) |
| | | | | |
| | Email | Gender | Phone | |

| Member's Parents (If staying / visiting with member) | | | | |
|--|------------|-------------|----------------|------------------|
| Father | First Name | Middle Name | Last Name | DOB (dd-mm-yyyy) |
| | | | | |
| | Email | Phone | | |
| Mother | First Name | Middle Name | Last Name | DOB (dd-mm-yyyy) |
| | | | KORUTHU | |
| | Email | Phone | | |
| Date of Marriage | | | | |

| Spouse's Parents (If staying / visiting with member) | | | | |
|--|--------------|-------------|---------------|------------------|
| Father | First Name | Middle Name | Last Name | DOB (dd-mm-yyyy) |
| | DAVID | | LUKOSE | |
| | Email | Phone | | |
| Mother | First Name | Middle Name | Last Name | DOB (dd-mm-yyyy) |
| | | | | |
| | Email | Phone | | |
| Date of Marriage | | | | |

A family picture with all immediate family members must be attached (or emailed to vicar) with the application.

Date

Member Signature

Date

Spouse Signature

FOR OFFICE USE ONLY

Prayer Group

ID #