

MEMBERSHIP FORM FOR YEAR 2025

Living Stone Alliance Church (LSAC) of the C&MA

3131 N. Meade Street, Appleton, WI 54911

(920) 832-1310

Check one: Renew membership Transfer from another church New convert Other (explain): _____

Head of household (legal name): _____ Hmong name: _____

Address: _____ Phone: (____) _____ Email: _____

Date of Birth: ____/____/____ Baptized? Yes No Gender: Male Female

Household members	Date of Birth	Gender	Baptized	Signature (if above 18)
1. _____	____/____/____	Male Female	Yes No	_____
2. _____	____/____/____	Male Female	Yes No	_____
3. _____	____/____/____	Male Female	Yes No	_____
4. _____	____/____/____	Male Female	Yes No	_____
5. _____	____/____/____	Male Female	Yes No	_____
6. _____	____/____/____	Male Female	Yes No	_____
7. _____	____/____/____	Male Female	Yes No	_____
8. _____	____/____/____	Male Female	Yes No	_____
9. _____	____/____/____	Male Female	Yes No	_____
10. _____	____/____/____	Male Female	Yes No	_____

Do you authorize LSAC to use photos and or video recordings of you and/or your family for church approved purposes? Yes No

By signing below, my household agrees to become members of this church. We will submit to all Christian & Missionary Alliance, Hmong District and LSAC bylaws and policies as they apply to us. We understand that we may withdraw our membership at any time by notifying the Board of Elders or the Senior Pastor.

Signature (Head of household) : _____ Date: _____