

IMC



**Interdenominational Ministers' Conference of Greater Harrisburg
MEMBERSHIP APPLICATION**

APPLICANT INFORMATION

Name:		
Birthdate:	Home Phone:	Cell Phone:
Home address:		
City:	State:	ZIP Code:
Email:		

CHURCH/ORGANIZATION INFORMATION

Name of Church or Organization:		
Address:		
Office Phone:	Fax:	
City:	State:	ZIP Code:
Email:	Website: www.	

EMERGENCY CONTACT

Name:		
Address:	Phone:	
City:	State:	ZIP Code:
Relationship:		

SPOUSE INFORMATION

Name:		
Birthdate:	Mobile Phone:	Is this a joint membership? Yes <input type="checkbox"/> NO <input type="checkbox"/>
Email:		

COMMITTEE INTEREST

<input type="radio"/> Membership Committee	<input type="radio"/> Housing Committee	<input type="radio"/> MLK Service
<input type="radio"/> Social Action Committee	<input type="radio"/> Benevolence Committee	
<input type="radio"/> Voter Registration Committee	<input type="radio"/> Sick Committee	
<input type="radio"/> Social Committee	<input type="radio"/> Publicity and Public Relations	
<input type="radio"/> Political Action Committee	<input type="radio"/> City Wide Revival	

SIGNATURES

Individual membership is \$50.00 per year. Retired pastor membership \$20.00 per year. *Payable February of each year.*

Signature of applicant:	Date:
Signature of spouse <i>(only for joint membership):</i>	Date:
Signature of IMC officer:	Date:

Enhancing God's Love Through Unity and Diversity

Please Send Completed Application To:
IMC
P.O. Box 5692
Harrisburg, PA 17110

Web: www.imcofgreaterharrisburg.org
Email: imc@imcofgreaterharrisburg.org
Telephone: 717.236.8600