

*Oxford Mt. Zion Baptist Church
25215 Zion Road – P.O. Box 212
Ruther Glen, Virginia 22546
804-448-2277
www.oxfordmtzion.net*

Church Membership Information

Please complete this form and return to the church clerk. All forms will remain in the church files for membership accuracy and needed references.

Member's Name: _____ **DOB:** _____

Address: _____ **City:** _____

State: _____ **Zip:** _____ **Home Telephone #:** _____

Cell Phone #: _____ **Email:** _____

Date Joined/How Joined Church: _____
(If remembered ex: baptism, reinstatement, Christian Experience)

Membership Status – Active: _____ **Inactive:** _____
(If you have not attended church or contributed tithes, step of faith or special donations during the past 18 months, you are considered inactive)

Where have you previously served in the church? _____

List Church Interests: _____

Special Skills, Talents, and/or Training: _____

Will you be willing to serve for special programs or other areas of the church?

Thank you for your church information and interest.