



Emmanuel Worship Center

P.O. Box 3214

Chester, VA 23836

(804) 356-3293

Membership Made Easy Form

We are excited that you have decided to join the Emmanuel Worship Center family. In an effort to make this process simple we are asking that you complete this form. You can return it to a member of our membership ministry. Once your information has been processed you will receive additional instructions from the membership ministry.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Hm Phone: _____ Cell: _____ May we text this #? _____

Email Address: _____

If you are joining as a family please list names of additional family members relationship.

Would you like for each member of the family to receive a tithing envelop and number?

Yes or No