Maple Springs Baptist Church

4131 Belt Road Capitol Heights, MD 20743

NAME/ADDRESS/MEMBER STATUS UPDATE FORM

SUBMITTED BY: DATE SUBMITTED:			
***************************************	*******	*****	•••••
	it a separate form for each person w t you last submitted to the church on t		hanged in your family.
FORMER NAME:			
NEW NAME:			
******	*******	*****	**********
ADDRESS/CONTACT INFORM	ATION UPDATE:		
STREET ADDRESS: _			
(City)		 (State)	(Zip Code)
		Cell	☐ Home ☐ Work
E-MAIL:			
	ase print their full name as listed on the cu		
MEMBER STATUS UPDATE: P	**************************************	person.	
PLEASE CHECK ONE:	☐ Moved membership to another church	☐ No longer a n	nember Deceased
**************************************	OMPLETED BY CHURCH O	FFICIAL ONLY	<u> </u>
CHURCH OFFICIAL APPROVA	AL:		
VERIFIED BY:			
SIGNATURE:		DATE SIGNE	D:
*** Completed forms show	uld be placed in the Data Automation mails	oox located in the Ch	urch Office ***