

Transfer of Membership
Our Savior Lutheran Church

Date of Request _____

Date of Transfer _____

Names _____

Address _____

Transfer To From

Rev. _____ Church _____

Address _____

- | | | | | |
|---|--|--|--|--|
| <input type="checkbox"/> Request Transfer | <input type="checkbox"/> Transfer Letter Sent/Received | <input type="checkbox"/> Power Church | <input type="checkbox"/> Running Record | <input type="checkbox"/> Directory |
| <input type="checkbox"/> Elder List | <input type="checkbox"/> E-mail Elder | <input type="checkbox"/> Membership Record | <input type="checkbox"/> New Member List | <input type="checkbox"/> Received/Brunch |
| <input type="checkbox"/> Stewardship Book | <input type="checkbox"/> Offering Envelopes | <input type="checkbox"/> Picture Board | | |