



Alabama-West Florida Chapter of PAUMCS
Professional Association of United Methodist Church Secretaries

2011 Membership Form

Please complete the form and send your payment of \$15.00 to PAUMCS, c/o Jeff Duval,
73 E Kathy Lane, Freeport Florida 32439. (Retired members receive a reduced rate of \$7.50)

PERSONAL INFORMATION: New Member Renewing Membership

Name:

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cellular Phone: _____

Spouse's Name: _____ Your Birth Date: _____

A Member of: _____ Church for ____ years

E-mail at Home: _____

EMPLOYMENT INFORMATION (If you are retired, please list that under employer):

Employer: _____ Church/Agency _____

Address: _____ City: _____ State: _____ Zip: _____

Job Title: _____ Work Phone: _____ Fax: _____

Number of Years: _____ Full Time Part Time Volunteer

Total Membership of Church: _____ Number of Employees: _____

E-mail at Work: _____

Please send PAUMCS correspondence to my home work address.

AWF PAUMCS MEMBERSHIP:

Date joined: _____ Number of years as a member: _____

We need your talents and ideas! Please check the areas of service that interest you:

President	Vice President	Recording Sec.	Membership Sec.	Treasurer	
Communications	By Laws	Historian	Nominations	None	

I am sending **CHAPTER DUES**, in the amount of \$_____. Check made payable to
AWF PAUMCS and mailed to **PAUMCS, c/o Jeff Duval, 73 E Kathy Lane, Freeport, FL 32439.**

SIGNATURE: _____ DATE: _____

<p>NATIONAL PAUMCS MEMBERSHIP Send your dues for \$50.00 and completed form directly to: GCFE, Attn: PAUMCS, P. O. Box 340029, Nashville, TN 37203-0029</p>	
Date joined: _____	Number of years as a member: _____
Attended Certification Program at Emory University or Candler? _____ Class of: _____	