



# Hellenic Orthodox Church of Lowell Holy Trinity 2019 Membership

BAPTIZED OR CHRISMATED  
ORTHODOX CHRISTIAN?

NAME (First/Last) \_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_

BAPTISMAL NAME \_\_\_\_\_ DATE OF NAME DAY \_\_\_\_\_

SPOUSE (First/Last) \_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_

BAPTISMAL NAME \_\_\_\_\_ DATE OF NAME DAY \_\_\_\_\_

RESIDENCE ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE NUMBER: ( \_\_\_\_\_ ) \_\_\_\_\_

	Self	Spouse
Birth Date		
Business Phone		
Cell Phone		
Occupation		
Email		

Names of Dependent Children	Birth Date	Name Day	Email (if applicable)

Please fill out both sides of the page entirely and return to the address below – Thank you.



## Hellenic Orthodox Church of Lowell Holy Trinity 2019 Membership

**Holy Trinity Hellenic Orthodox Church of Lowell**  
**Attention: 2019 Membership / Support**  
**62 Lewis Street, Lowell, MA 01854**  
**Tel: (978) 458-8092 Email: [info@holytrinitylowell.net](mailto:info@holytrinitylowell.net)**  
**website: [holytrinitylowell.net](http://holytrinitylowell.net)**

