



Membership - Stewardship Form

I/We would like to become members of the Armenian Church of the Holy Translators.

Last Name: _____

Address: _____

City/State/Zip: _____

Home Phone: _____

Name: _____

Spouse Name: _____

Date of Birth: _____

Date of Birth: _____

Cell: _____

Cell: _____

Email: _____

Email: _____

Occupation: _____

Occupation: _____

Baptized: _____

Baptized: _____

(Denomination – i.e. Armenian Church, Roman Catholic, Protestant, Other)

I/We have _____ child(ren).

Name: _____

Date of Birth: _____

Name: _____

Date of Birth: _____

Name: _____

Date of Birth: _____

Name: _____

Date of Birth: _____

I have enclosed my/our membership dues:

of adults (ages 25-66) _____

\$175 per adult \$ _____

of seniors (age 67+) _____

\$100 per senior \$ _____

Total \$ _____

of students (ages 18- 24) _____

\$25 per student \$ _____

My/Our Armenian Church of the Holy Translators Stewardship commitment for this year will be:

_____ \$100 _____ \$250 _____ \$500 _____ \$1,000 _____ \$2,500 _____ Other (please specify)

All pledges to be fulfilled by December 31.

Checks may be made out to Armenian Church of the Holy Translators (or simply ACHT).

If you would like to make a payment by credit card, please return this form and visit the Donate page on our website at holymtranslators.org. Select membership or stewardship from the drop-down menu.

Armenian Church of the Holy Translators ■ 38 Franklin Street ■ Framingham, MA 01702
508-875-0868

www.holytranslators.org