

PARISH MEMBERSHIP TRANSFER FORM

(Stevens Point Deanery)

NAME: _____

ADDRESS: _____

CURRENT PARISH: _____

FUTURE PARISH: _____

I, _____, make a formal request to change my Christian responsibility from my current parish. My reason(s) for making this request include:

I understand that this transfer becomes effective with the signatures of the pastors of the involved parishes are given. This request may be discussed by the pastors involved. I acknowledge that I will not make another similar request within a two-year period.

Signatures:

Parishioner: _____ Date: _____

Parishioner: _____ Date: _____

Current Pastor: _____ Date: _____

Future Pastor: _____ Date: _____

Office Note:

Please note that the transfer should not be finalized in the ParishSoft system until all signatures are received and returned to future parish of membership.