

Professional Association of United Methodist Church Secretaries Florida Chapter

MEMBERSHIP FORM February 2017 ~ February 2018



\$10 New _____ \$10 Renewal _____

Last Name: _____ First Name: _____

Agency/Church Information

Name _____

Address _____

Phone _____ Email _____

District _____

Are you a Certified United Methodist Church Secretary? Yes ____ No ____

For information on certification, go to: www.paumcs.org, or call the chapter president.

Would you be interested/available to serve on the Planning Committee ____ yes ____ No

Would you be interested/available to serve on the Executive Committee ____ yes ____ No

Personal Information

Address _____

Cell Phone _____ Email _____

Date Paid: _____

Cash or Check # _____

Received by: _____

Serving Christ Through the Church Office