

New Member Report

Congregation _____ Date _____

Names of persons uniting with the congregation: (Please indicate the way in which they were received: B = Baptism, L = Letter, R = Reaffirmation.)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please send a copy of this report to the District Office quarterly (April 1, July 1, October 1, January 1) if you would like the names of your new members printed in the District Newsletter.

Mail to: Atlantic Northeast District
500 East Cedar Street
Elizabethtown, PA 17022

Fax to: (717) 367-8737

Email to: jreed@ane-cob.org

If you would also like this information included in the **Messenger**:

Mail to: Jean Clements
1451 Dundee Avenue
Elgin, IL 60120

Email to: jclements@brethren.org