

**HOLY TRINITY
GREEK ORTHODOX
CHURCH
Biloxi, MS**



**2025 Membership
Declaration**

I declare my intention to be a member of the Holy Trinity Greek Orthodox Church in Biloxi, per the criteria listed below:

- I am a baptized or chrismated Orthodox Christian;
- I am a communicant in the Holy Mysteries;
- I am over 18 years of age;
- I have made a written commitment of support to the parish by pledging my time, talent, and treasures. (Your pledge below may be updated at any time in the future.)

Declared members who are current with their pledge have voting privileges at the parish meetings and elections.

Members' printed names:

1. _____ 2. _____
3. _____ 4. _____

Signature _____ Date _____

Come and See God work through your talents, skills and experience, as well as your financial support.

Pledge of TIME/TALENT: I/We would like to offer my/our time & talents to the ministries of Holy Trinity in the following areas:

- Worship: Choir Reading Altar Server Education: Sunday School Adult Education Other: _____ Hospitality: Greeting Coffee Hour Cooking Visitation of Elderly/Infirm Maintenance: Cleaning Grounds Construction Electrical/Plumbing Administration: Council Stewardship Committee Mailings Technology Legal Events: Festival Pastry Sale Community Outreach Other: _____

Pledge OF TREASURES: I/We commit to Christ and His Church through this pledge. I/We expect to give the following total amount: \$ _____
Weekly _____ Monthly _____ Quarterly _____ Annually _____
Balloon Payment at end of year of \$ _____.

(Note to determine Member Standing your pledge is prorated for the end of the month prior to Assembly Meetings. Example: One

pledges \$1200. To be in good standing for a meeting in April one should have paid \$300 by the end of March. An exception would be for those who plan to make a balloon payment at the end of the year as indicated on the pledge form.)

“On the first day of every week, each one of you should set aside a sum of money in keeping with his/her income” (See 1 Corinthians 16:2)

HOLY TRINITY GREEK ORTHODOX CHURCH Biloxi, MS



PERSONAL INFORMATION:

SELF Name: _____

Address: _____

City _____ State _____ ZIP Code _____

Orthodox? Yes / No Name Day/Baptismal Name _____

Phone: _____ **Email:** _____

Occupation: _____ Birth date: _____

SPOUSE Name: _____

Orthodox? Yes / No Name Day/Baptismal Name _____

Phone: _____ **Email:** _____

Occupation: _____ Birthdate: _____

Names, Birth dates, and Name Days of Dependent Children:

Members who have filled out the Membership Declaration Form:

1. _____

2. _____

3. _____

4. _____

Signature

Date