



**HOLY TRINITY ROMANIAN AMERICAN ORTHODOX CHURCH**  
**3315 VERDUGO ROAD, LOS ANGELES, CALIFORNIA 90065**

Associated with The Romanian Orthodox Metropolia of the Americas  
MITROPOLIA ORTODOXA ROMANA A CELOR DOUA AMERICI

**Application for Parish Membership**

\_\_\_\_\_/\_\_\_\_\_  
Name (Last Name, First Name, Middle Name) Maiden Name (if applicable)

\_\_\_\_\_  
Street Address and Apartment #

\_\_\_\_\_/\_\_\_\_\_  
City, State or Province, Zip/Postal Code Telephone Number

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date of Birth Place of Birth (City, State or Province, Country)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Name of Father Name of Mother Maiden Name

**IF BAPTIZED ORTHODOX:**

Baptized by Rev. Fr.: \_\_\_\_\_

Parish Church: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

City/State or Province: \_\_\_\_\_

**IF CONVERTED TO ORTHODOXY:**

Previous Religious Affiliation: \_\_\_\_\_

Parish Church: \_\_\_\_\_ Location: \_\_\_\_\_

Ritual of Acceptance: [ ] Baptism [ ] Christmation [ ] Declaration of Faith

Priest Serving: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

IF TRANSFERRED FROM ANOTHER ORTHODOX PARISH:

Name of Parish: \_\_\_\_\_

City and State/Province: \_\_\_\_\_

Diocese: \_\_\_\_\_

FAMILY STATUS:

Single

Married

Widow (er)

Divorced

IF MARRIED:

Name of Spouse: \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Religious Affiliation: \_\_\_\_\_

Date of Marriage: \_\_\_\_/\_\_\_\_/\_\_\_\_ Officiant: \_\_\_\_\_

Church Affiliation: \_\_\_\_\_

Church City and State/Province: \_\_\_\_\_

CHILDREN:

Name	Birth Date	Baptism Date	Gender
____/____/____	____/____/____	____/____/____	____
____/____/____	____/____/____	____/____/____	____
____/____/____	____/____/____	____/____/____	____
____/____/____	____/____/____	____/____/____	____
____/____/____	____/____/____	____/____/____	____

Remarks \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_