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|  |  |  |  |  |  | West Jamaica Conference,  P. O. Box 176, Catherine Hall,  Montego Bay, St. James  Telephone: 876 952-2727, 618-2416  Fax: 876 940-3080  Email:secretariat@westjamaica.org.     |  | | --- | |  | |  |  |  |
| Seventh-day Adventist Church - YouTube   |  | | --- | |  | |  |  |  |  |  |  |  |  |  |
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| **WEST JAMAICA CONFERENCE OF SEVENTH-DAY ADVENTISTS** | | | | | | | | |  |
| **Transfer of Church Membership** | | | | | | | | |  |
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| To the Clerk of the Seventh-day Adventist Church in | | | | | |  | | | |
| We have received a request from | | | |  | | | | , who now holds | |
| membership in your church, to unite with the Seventh-day Adventist Church in | | | | | | | | | |
|  | | | . As soon as your Church has given this request due | | | | | | |
| consideration, and the transfer has been authorized, kindly send notice of same to: | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |
| **Clerk:** |  | | | | | | | | |
| **Address:** |  | | | | | | | | |
|  |  | | | | | | | | |
| **Signature:** |  | |  | **Date:** |  | | | | |
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| **TO THE CHURCH CLERK:** | | |  |  |  |  |  |  |  |
| This form should be filled out by the clerk of the church which the applicant for transfer | | | | | | | | | |
| wishes to join and mailed to the clerk of the church where the applicant now holds | | | | | | | | | |
| membership. | | | | | | | | | |
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