



Middlesex United Methodist Church Connection Card – August 24, 2025

Good Morning and Welcome!

We are so glad you are joining us today!

Please complete and place in the designated container. Thank you!

Name _____

Children _____

Guest: 1st time ____ 2nd time ____ 3rd time ____ Regular Attender ____ Member ____

□ Please complete the following if you are a guest; or if your information has changed.

Age Group: ____ under 20 ____ 20s ____ 30s ____ 40s ____ 50s ____ 60s ____ 70s and up

Birthday (month/day) _____

Mailing Address _____ Apt. _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Occupation _____

** We are always excited when we meet new friends! How did you hear about Middlesex UMC?*

INFORMATION REQUEST:

____ Looking to begin a relationship with Jesus Christ

____ Life Groups/ Sunday School

____ Baptism / Church Membership

____ Would like a visit/conversation with a Pastor

____ Ways to *Plug-In* at MUMC

____ Sign up for MUMC's weekly E-note

Sponsorship opportunities

____ Sunday's Bulletin (Contact the church office for available dates)

____ Altar Flowers

____ Offering Envelopes

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SERVE: Here I am Lord

Worship:

___ I would like to help with worship Services by:
___ Reading scripture ___ Serving communion
___ Preparing communion ___ Ushering/Greeting
___ Acolytes ___ Tech/sound team

Missions:

___ I will help serve breakfast for Community CARES ___ I will provide food for the Community CARES breakfast 1st Saturday of each month.

Congregational Care:

___ I would like to help with visitation of shut ins.
___ I will provide Meals for the Meal Ministry

Facilities:

___ I would like to serve on the Facilities team

Events:

_____ I will serve on the Community Engagement Planning Team, next meeting will be **Wednesday, 9/3 and 9/17 At 4:00 pm in rm 101.**

_____ I Will attend Golden Lights Luncheon on Mon. **9/8 @ 12pm to 2pm**

___ I would like to volunteer for the **Fall Festival** on **9/20 @ 12pm to 4pm**

CONNECT & GROW:

My child _____ will attend Ignite 1st and 3rd Sunday's @ 6pm to 8pm

_____ will attend the Men's group Breakfast **9/6 @ 9am**

_____ will attend Chair Yoga on **Tuesdays @ 11:30am, rm 101**

Please add my College Student to the College Student Ministry:

Student Name: _____

College/University: _____

Address: _____

Year in School: Freshman ___, Sophomore ___, Junior ___, Senior ___

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Please add my College Student to the College Student Ministry:

Student Name: _____

College/University: _____

Address: _____

Year in School: Freshman ___, Sophomore ___, Junior ___, Senior ___

Name of person making the request: _____

- ☐ *I would like this prayer request added to the MUMC Prayer Sheet.*
☐ *I need a prayer shawl/chemo cap*
for _____.

Prayer Requests/Comments

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Name of person making the request: _____

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Prayer Request Card

(Your Prayer requests can be placed in the offering plate or in the offering box in the back of the Sanctuary.)



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