


Office Use - Processed _____

SHEPHERD'S CENTER OF TOPEKA

Membership Dues

REGISTRATION: Mail this completed registration form to SCT, 4101 SW 15th St., Topeka, KS 66604 along with your check payable to SCT. Check this box if you are a new member, or if your information has changed 

NAME(S) _____

ADDRESS _____ ZIP CODE PLEASE _____

PHONE # _____ EMAIL _____

PLACE OF WORSHIP _____

2021 Membership Dues _____ x \$30.00 = _____

Check Total = _____

Check Number _____

----- Cut along this line and keep the bottom portion for your receipt -----

SHEPHERD'S CENTER OF TOPEKA

Membership Dues - Receipt

2021 Membership Dues _____ x \$30.00 = _____

Check Total = _____

Check Number _____

Date _____