## Application for Membership at Christ Chapel

| Name  |   |
|---|---|
| Address   |   |
| Telephone   | Other # (cell?)   |
| E-mail  | Spouse  |
| Children at home  |   |
| May we list the above information in the ch   | nurch directory? (Yes / No)   |
| May we call you at work? tel. #   |   |
| Are you 18 years of age or older? (Yes / No   | o)  |
| I would like to be considered for (check on Full Membership Re-activation of Membership | ,   |
| Are you in substantial accord with the faith<br>Church Constitution? (Yes / No)         | in the Membership Covenant? (Yes / No)  |
| Please express your Christian testimony (or decision for Christ; and one or two subsequ | n reverse): The preliminary spiritual background; your uent spiritual milestones (if applicable). |
| Date of your baptism:   |   |
| Of what church(es) have you been a memb   | er or regular attender in the last five years?  |
| Please add any comments or information y  | ou would like us to know  |
| Office Use: Met with Pastor /   |   |
| Commended to the Church / /   | Welcomed / /  |