

Membership Application



Last Name: _____ First Name _____

DOB: ____/____/____ Membership Date: ____/____/____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Single ☐ Widow ☐ Divorced ☐ Married ☐ If Married fill the blue section

Last Name of Spouse: _____ First Name of Spouse: _____ Spouse's DOB: ____/____/____

Wedding Anniversary Date: ____/____/____

Were you a member of a different church previously? ☐ Yes ☐ No

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Membership Duration _____ Pastor _____

Membership Requirements

1. Are you a born again believer according to *John 31-7*? ☐ Yes ☐ No
2. Have you been baptized by full submersion, according to *Matthew*? ☐ Yes ☐ No
3. Are you willing to collaborate with all the needs of the church according to *Matthew 16:24 & Romans 12:1*? ☐ Yes ☐ No
4. Will you make an effort to be present in most of our worship gatherings & attend IFO classes? ☐ Yes ☐ No
5. Will you help the church maintain a clean body by abstaining from vain conversations, gossip according to *Psalms 15:1-4, Proverbs 6:16, 19:20, Galatians 5:1, James 5:9* and commit to financially supporting the church according to the bible in *Genesis 28:22 Deuteronomy 14:22 & Malachi 3:10*? ☐ Yes ☐ No

Children under 18 of age that are living with you:

First Name: _____ Last Name: _____

DOB: ____/____/____ Membership Date: ____/____/____ ☐ Male ☐ Female

First Name: _____ Last Name: _____

DOB: ____/____/____ Membership Date: ____/____/____ ☐ Male ☐ Female

First Name: _____ Last Name: _____

DOB: ____/____/____ Membership Date: ____/____/____ ☐ Male ☐ Female

First Name: _____ Last Name: _____

DOB: ____/____/____ Membership Date: ____/____/____ ☐ Male ☐ Female

Official Use Only

Water Baptism ____/____/____

Accepted as new member ____/____/____

Pastor _____

Secretario(A) _____

