

MEMBERSHIP APPLICATION

Carefully fill in the following information. This will enable us to minister to you and include you in active service within the Grace Covenant Church Family. **Please print in black or blue ink.**

			Т	YPE OF M I	EMBERSHIP				
			esident nembers nmunity.					Associate nmunity who may home churches.	
-	- -				nbership (if ur	,	YES	NO	
Parent's s	ignature	of consen	t (if applicat	ole):					
			G	ENERAL IN	FORMATION	N			
Full Name) :								
Spouse's Name:	Last			First			М.І.	Title	
	Last			First			M.I.	Title	
Address:	Street Ac	ddress						Apartment/Unit #	
	City					State		ZIP Code	
Phone:				Email:					
Birth Date	:	1		Anniv	ersary Date:	I	1		
Marital Sta	atus:	Single	Married	Widowed	Separated	Divorced	Remarrie	∍d	
Children's Names:					Birthdays:				
							1		
							1		
							1		
							1		
							1		
							1		
						1	1		

EDUCATION							
Last Grade Completed:	-						
College/University:	Degree:						
	Minor Field of Study:						
College/University:	_ Degree:						
	Minor Field of Study:						
Occupation:	Company:						
SPIRITUAL	Information						
Testimony of Salvation:	INI ONIMATION						
	_						

I have been baptized as a believer:					
Where:					
Sprinkled Immersed Other: Mode of Baptism: Sprinkled Immersed Other: YES NO					
I have not been baptized, but I am interested in being baptized:					
I have previously been a member/attendee of:					
Pastor's Name:					
Church Address:					
Church Phone:					
I left the above mentioned church for the following reason(s):					
What do you believe your spiritual gifts to be?					
What are your God-given natural gifts, talents, skills, or hobbies?					
Are you aware of any differences with this church's teaching of the Scriptures that would make it difficult for you to get along with others in the church or to commit yourself to the church body? If so, please mention them:					
Please list any memberships or affiliations with any other churches or organizations such as Rotary Club, Free Masons, etc.					

Are you planning to commit yourself to others in the church by your presence of the church, by your financial support, and by your helpful involvement in the in the church?			YES	NO						
Do you agree to submit yourself to the spiritual leadership of Grace Covenant accountability for the following: spiritual growth, training, and submission to ch			YES	NO						
By signing below, I acknowledge that I have carefully read the Grace Covenant Church Book of Faith and Order and am willing to abide by it. As a member of Grace Covenant Church, I realize that I am placing myself under the authority of the guidelines mentioned in the Book of Faith and Order as well as under the authority of the church for the purpose of personal spiritual growth and accountability.										
Signature of candidate: Da	ate:	1 1								
Office Use Only										
Elder(s)/Deacon(s) conducting interview:										
Comments/Recommendations:										
Date received into membership:										
Elder assigned for discipleship care:										