

New Life Church Membership Application

Name: _____ Home Phone: _____

Mailing Address: _____ Cell Phone _____

City, State, Zip _____

Email _____ DOB _____

Gender: Male Female

Employer _____ Position _____

Marital Status: Single Married Divorced Widowed

Spouse's Name if Applicable: _____

Names of Children (living at home)	DOB	Names of Children (living at home)	DOB
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Hobbies _____

Requirements for Membership

- Complete Discover New Life Sessions
- Support New Life Church leadership
- Embrace the essential beliefs of New Life Church
- Attend New Life Church regularly
- Financially support New Life Church through tithes and offerings
- Serve in a ministry
- Demonstrate Christ-like character

Initial
Here

Your Membership History

- First-time Member
- First-time Member at New Life Church:
- Previous Member of what church: _____

Your Expectations of New Life Church:

- Minister to my spiritual needs, especially through the preaching of God's Word.
- Assist with Godly counsel and prayer especially in time of decision, stress, and difficulty.
- Provide opportunities for Christian fellowship.
- Serve in matters of religious instruction.
- Be a sound steward of financial and personal investments in the kingdom of God.

Having personally experienced the new birth through faith in Jesus Christ and being in agreement with the essential beliefs of New Life Church, and desiring to be part of their faith community, I apply for membership.

Signature: _____ Date: _____

Office Use Only

Pastoral Recommendation _____

Pastoral Comments _____