

# Grand Avenue Baptist Church Membership Application

Date: \_\_\_\_\_

## Applicant Information (one applicant per form)

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Marital Status: Single  Engaged  Divorced  Widowed  Married  Wedding date: \_\_\_\_\_

Children:

Name 1: \_\_\_\_\_ birth date: \_\_\_\_\_

Name 2: \_\_\_\_\_ birth date: \_\_\_\_\_

Name 3: \_\_\_\_\_ birth date: \_\_\_\_\_

Name 4: \_\_\_\_\_ birth date: \_\_\_\_\_

## Information & Background:

Do you profess that you have personally experienced spiritual birth, and are solely trusting in the Lord Jesus Christ for your salvation?  Yes  No

Baptized (date/location): \_\_\_\_\_

Have you experienced water baptism by immersion, symbolizing death to your old life, and the beginning of a new life under Christ's authority?  Yes  No

As evidence of your conversion experience, do you affirm that you are seeking wholeheartedly to obey Jesus Christ as the Lord of your life?  Yes  No

Do you subscribe to Grand Avenue's statement of faith and core values?  Yes  No

Are you currently under any church discipline or have you been under any prior church discipline?  Yes  No

If 'Yes' please explain: \_\_\_\_\_

Are you willing to do your best to meet the expectations of membership at GABC?  Yes  No

Have you completed the Foundations of Membership Class?  Yes  No (if Yes, Date completed: \_\_\_\_\_)

Membership at Previous Church (Name, city, state): \_\_\_\_\_

How long were you at your previous church? \_\_\_\_\_

Why did you leave your previous church? \_\_\_\_\_

\_\_\_\_\_

Name of contact pastor: \_\_\_\_\_ Phone #: \_\_\_\_\_

How were you introduced to GABC? \_\_\_\_\_

How long have you been attending GABC? \_\_\_\_\_

Why are you seeking membership at GABC? \_\_\_\_\_

\_\_\_\_\_

**Other Family Information:**

Name, address & phone number of nearest relative (other than listed above): \_\_\_\_\_

\_\_\_\_\_

**Interested in Other Areas of Ministry?**

Small Groups:  Foundations:  College Ministry:

Children's Ministry:  Student Ministry:  Worship Ministry:

Nursery & Preschool Ministry:  Discipling Relationship (1-to-1 Discipling):

**On a separate sheet of paper please provide a narrative statement on how you came to faith in Christ, and some highlights in your subsequent journey with Him.**

\_\_\_\_\_

**FOR OFFICE USE:**

**Membership by:**

Baptism (date) \_\_\_\_\_ (or) to be scheduled on \_\_\_\_\_

Statement Faith in Christ (date) \_\_\_\_\_

Interviewing Elder(s) Signatures: \_\_\_\_\_

Recommended: \_\_\_ Yes \_\_\_ No Date: \_\_\_\_\_ (or) Membership application process

ceased on: \_\_\_\_\_ for the following reason: \_\_\_\_\_

Approving Elders: \_\_\_\_\_

\_\_\_\_\_