



CHURCH MEMBERSHIP FORM

INSTRUCTIONS:

- Each new adult member should complete this form individually
- Please use a pen to complete this form; and write legibly
- Upon completion, please return to the instructor of the Joy 101 class

Date: _____

PERSONAL INFORMATION

Name: _____

Address: _____ City/State/Zip: _____

Phone Numbers: Home: _____ Cell: _____ Other: _____

Preferred Email: _____ Alternative: _____

Date of Birth: _____ (month/date/year – info will not be shared publicly) Sex: Male: ___ Female: ___

Marital Status (check one): Married: ___ Single: ___ Separated: ___ Divorced: ___ Widowed: ___

Spouse's Name: _____ Wedding Date: _____

Children's Names / School & Grade / Date of Birth:

- | | | | |
|----|-------|-------|-------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ |

Interest / Hobbies: _____

CHRISTIAN EXPERIENCE

Have you been baptized by immersion in the name of Jesus Christ?

Yes: _____ No: _____ When?: _____

Have you received the baptism of the Holy Spirit with the evidence of speaking in tongues?

Yes: _____ No: _____ When?: _____

Are you presently an active or inactive member of another church? Yes: _____ No: _____

If yes, please provide the name and location: _____

If yes, do you have a letter of release? Yes: _____ No: _____

In what ministries or church activities have you served on in the past?

I understand my spiritual gifts to be the following (evangelism, serving, leading, etc):

What are some of your talents, skills and/or natural abilities?

COVENANT AGREEMENT

I affirm that I have completed the OJMCC Joy 101 Class, receiving the Mission and Vision Statement, Statement of Fundamental Beliefs, Constitution and Bylaws along with other pertinent information; and am in full agreement with them in both word and spirit. As a member of this church, I will abide by these documents, and seek to fulfill the membership responsibilities to the best of my ability, and will endeavor to fulfill my responsibilities to the Lord and to His work.

Signature: _____ Print Name: _____

PERSONAL TESTIMONY *(optionally)*

We would love to share in your personal testimony, please use this space to do so:

To be completed by OJMCC staff only:

Date New Membership Class completed: _____

Date received by church clerk: _____

Date of right hand of fellowship: _____

Membership #: _____