



KINGSWAY FAMILY CHURCH

APPLICATION FOR MEMBERSHIP

Having personally experienced the new birth through faith in the atoning blood of the Lord Jesus Christ, and being in agreement with the doctrines and practices of this church (see Statement of Fundamental Truths, tract 34-4136), and desiring to be associated with those of like precious faith in Christian fellowship, I hereby apply for membership.

Mr./Mrs./Miss _____

Phone _____

Address _____

City _____ State _____ Zip _____

Occupation _____

Business Address _____

Phone _____

Date of Birth _____ Place of Birth _____

Date Converted _____ Baptized in Water? _____

Baptized in Holy Spirit? _____

Marital Status: Single ____ Married ____ Divorced ____ Widowed ____ Remarried ____

Names and Birth Dates of Children:

I am applying for: Adult Membership: ____ Associate Membership (age): ____

Junior Membership (Under 12 years old): ____

My membership has previously been in (Church) _____

Address _____ City _____

State _____ Zip _____

Please send a letter of transfer from the above church? YES or NO

Date: _____ Signature: _____