Membership Application

Please print neatly in ink.



| Steps | | | | |
|---|--|--|--------------------------------------|----------------|
| ☐ Complete this membership application | 1 | | | |
| □ Attend all membership classes □ Complete membership reading □ Schedule a pastoral interview □ Schedule baptism, if needed □ Participate in the Right Hand of Fellowship | | | | |
| | | | ☐ For more information see GGCCVA.or | org/membership |
| | | | Nama | Dirth Data / / |
| | | | First Middle | Birth Date/ / |
| | | | Address | |
| City, State, Zip | | | | |
| Home Phone () | Work Phone () | | | |
| Email | _ Spouse's Name | | | |
| Marital Status 🚨 Single 🚨 Married | d □ Divorced □ Separated □ Widowed | | | |
| Have you trusted Jesus Christ as your L | Lord and Savior? □ Yes □ No □ Not Sure | | | |
| Date and location where you were bapti | tized as a believer | | | |
| How long have you been attending Gos | spel of Grace? | | | |

| Are you presently—or were you previously—either a member or regular a another church? | attender of |
|---|-------------|
| □ Yes □ No | |
| If yes, please complete the following: | |
| Name of Church | |
| Address | |
| City, State, ZIP | |
| Attendance from to | |
| | |
| Have you thoroughly read and understood, and do you agree with, | |
| Our Statement of Faith*? | □Yes □No |
| Have you thoroughly read and understood, and do you agree to abide by, | |
| The Bylaws of Gospel of Grace Community Church*? | □Yes □No |
| Are you willing to submit to the loving rule of our elders? | □Yes □No |
| Have you thoroughly read and understood, and do you agree to abide by, | |
| the Affirmation of Commitment*? | □Yes □No |
| Do you attend a Bible study? If yes, which one? | |
| What area of ministry do you have experience in or would desire to partic | ipate in? |
| | |
| | |
| | |

Personal Testimony How would you explain the gospel from Scripture? Give a brief description of your conversion.

Applicant's Signature______ Date___/____

Pastor's Signature _____ Date ___/___