



# First Baptist Church of Mt. Carmel Membership Application

*When you are finished with this Application, please return it to either Pastor Steve or Marcia Hall, Administrative Secretary. Thank you!*

## Personal Information

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Gender:  F  M Marital Status:  Single  Married  Widowed  Divorced

Date of Birth: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

## Children Living at Home

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

## Membership Detail

Are you a member of First Baptist Church of Mount Carmel?  Yes  No  Unsure

Have you been born again? Are you a follower of Jesus?  Yes  No  Unsure  
*(Please complete the testimony section on the reverse side of this form)*

Have you been baptized by immersion as a follower of Jesus Christ?

Yes

No

Are you willing to commit to be held accountable to FBC's Membership Covenant?  Yes  No

Are you in agreement with FBC's doctrinal statement?  Yes  No

In what ministries are you serving or are interested in serving at FBC? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Were you a member/regular attender of another church before attending First Baptist?  Yes  No  
If you will be joining FBC by transfer of letter from another church, please list the name of the church:

\_\_\_\_\_

Were you in good standing with your previous church?  Yes  No

Please write a brief summary of your personal testimony and include the following:

1. *What was your life like before you received Christ as your Savior?*

2. *Describe your conversion. How and when did you receive Christ as your Savior?*

3. *How has your life changed since coming to Christ?*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date