



APPLICATION FOR MEMBERSHIP

(Please complete this application prior to membership interview.)

Date _____

Date of Birth _____

I am applying for _____ *Church Membership*
_____ *Fellowship Membership*

Date of Believer's Baptism _____

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____ - _____

Email _____

Marital Status _____ Occupation _____

Employer _____ Work Phone _____

Spouse and children's names (please give birth dates and gender of children):

Spouse _____

Children _____

Most recent or current church membership _____

Address _____ City _____ State _____ Zip _____

Member in good standing? _____ Yes _____ No Disciplined by another church? _____ Yes _____ No

Would you like us to send a letter to your previous church regarding your new membership? _____ Yes _____ No

Testimony (How you became a Christian – circumstance of conversion, age, date, etc.)

What Scripture assures you of your salvation? _____

Ministry Involvement:

Are you currently serving in a ministry at Woodcrest? _____ Yes _____ No

If yes, what area(s) _____

If no, is there a ministry where you would like to serve? _____

I have read and agree with the Woodcrest Church Doctrinal Statement. ___ Yes ___ No

I have read and agree with the Woodcrest Church Covenant. ___ Yes ___ No

Comments by applicant _____

Signature _____

Membership Process Checklist

(For office use only)

Procedure:	Date:	Recorded by (name):
Membership class completed	_____	_____
Believer's Baptism by immersion (Not required for fellowship membership)	_____	_____
Membership interview by: _____ _____ _____	_____	_____
Recorded in WCC data base	_____	_____
Welcomed into Membership	_____	_____
Letter of Welcome sent	_____	_____
Membership Transfer Letter sent	_____	_____

Membership Terminated

Date _____ Reason _____

New Church _____

Recorded by _____ Date _____

Comments

