



# MEMBERSHIP APPLICATION

141 Alberta Drive  
Fort McMurray, Alberta T9H 1R2  
T. 780.743.3747  
E. Info@northlifechurch.ca

### PRIMARY CONTACT INFORMATION

Name \_\_\_\_\_ Phone \_\_\_\_\_

Street \_\_\_\_\_ Town \_\_\_\_\_

Postal Code \_\_\_\_\_ Email \_\_\_\_\_ Birth Date \_\_\_\_\_

Date baptized: \_\_\_\_\_ Place baptized \_\_\_\_\_  
*(Membership requires baptism by immersion as a believer.)*

Current Church Membership(if any): \_\_\_\_\_

If you are under 13 years of age, skip this section and complete the sections on the back of this form.

### FAMILY INFORMATION *(Where Applicable)*

Marital Status \_\_\_\_\_ Name of Spouse \_\_\_\_\_

Names & ages of children:

_____	_____
_____	_____
_____	_____
_____	_____

Yes  No It is my desire and intention to walk with Jesus as Lord in my life.

Yes  No I recognize the spiritual authority vested in the local church. If it is ever considered warranted by the church leadership, I will submit to the loving biblical discipline of my church.

Yes  No I have read the church constitution and statement of faith.

Yes  No I agree without reservation with the statement of faith.  
*(If you have reservations, please explain them, using a separate page.)*

I will never knowingly teach or promote a doctrinal position different from that contained in the statement of faith.

\_\_\_\_\_ Signature \_\_\_\_\_ Date



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## ADDITIONAL INFORMATION

Please share your story of when and how you put your faith in Jesus Christ:

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Please share why you wish to become a member of Fellowship Baptist Church.

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## OFFICE USE ONLY

Interviewing elders, pastor: \_\_\_\_\_

Date interviewed: \_\_\_\_\_

Date received into membership: \_\_\_\_\_

Date removed from membership: \_\_\_\_\_

Letter of transfer received?

Yes  No

Letter of transfer sent?

Yes  No