

Application for Membership at
CALVARY
TEMPLE
Assembly of God

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, it is my desire to be associated with those of like precious faith in Christian fellowship. I hereby apply for membership at Calvary Temple.

Mr. _____
Mrs. _____
Miss _____ Spouse's Name _____

Date of Birth (self) _____ Date of Birth (spouse) _____

Place of Birth (self) _____ Place of Birth (spouse) _____

Children:

Names #1 _____ Date of Birth _____

#2 _____

#3 _____

#4 _____

#5 _____

If necessary, please use a separate piece of paper to add more family members.

Street Address _____

Mailing Address _____
(If different from street address)

City _____ State _____ Zip Code _____

Home Phone Number _____ Cell Phone Number _____

Work Phone Number _____

Occupation (self) _____ Spouse (if applicable) _____

Marital Status: Single _____ Married _____ Date: _____ Widowed _____

Divorced _____ Date: _____

Remarried _____ Date: _____

OVER PLEASE →

Application for Membership at
CALVARY
TEMPLE
Assembly of God

Date of Conversion _____

Baptized in Water? Yes _____ No _____ Baptized in the Holy Spirit? Yes _____ No _____

Membership in a previous church: Yes _____ No _____

(If yes) Name of church previously a member in: _____

Is above church an Assembly of God Church? Yes _____ No _____

Address _____

City _____ State _____ Zip Code _____

Telephone Number of above church _____

Please check here to send for a letter of transfer from above church _____

Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____

Thank you for your application. You will receive an application packet no later than one week prior to the next class. Please read and review the information in this packet before the class.

Blessings in the name of our Lord and Savior, Jesus Christ.

Sincerely,

Craig V. Riportella
Lead Pastor