

Membership Application

Date		Full Partner
Name		Spouse
Date of birth		Anniversary
Phone		Email
Address		
Children's names and birth dates		
Have you trusted in Jesus Christ for salvation?	YES	S NO
Have you been baptized by immersion?	YES	NO O
Are you currently a member of another church? If so, which church?		
Please share the Gospel using your own story. Include	your	r baptism experience.

active member of Ced of Christ. Would yo				
Teach Sunday School	ol	Adult	Child	
Sound				
Video				
Youth				
Awana				
Greeter				
Kitchen - serving at	special events			
Nursery				
Music Vocal	Instrumental			
College ministries				
Missions Global	Local (Alternat Love INC, Imp	_	y Center, House erve the City)	of Hope,
Other				

You will be contacted to set up your membership interview, baptism if needed, and upcoming membership classes. If you have any other questions, please contact the church office at chbc.office1@gmail.com or 319-277-3889.