CHILD/TEEN MEMBERSHIP INFORMATION

DATE _____

NAME _____
(Last) (Middle) (First)

ADDRESS _____ CITY _____

ZIP CODE _____

PHONE: Home _____ Work _____ Cell _____

Email _____

DATE OF BIRTH _____ CITY & STATE OF BIRTH _____

ARE YOU A BELIEVER IN JESUS CHRIST? YES ☐ NO ☐

HAVE YOU BEEN BAPTIZED BY IMMERSION? YES ☐ NO ☐

PRESENT CHURCH MEMBERSHIP

Please share with us the Gospel using your own story. Also, include your baptism experience.

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If you need more space, please attach on a separate piece of paper.

What are your hobbies?

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