
Church Membership Form

Personal Information

- **Full Name:** _____
- **Date of Birth:** _____
- **Gender:** Male Female Other
- **Contact Number:** _____
- **Email Address:** _____
- **Address:**

Spiritual Information

- **Date of Baptism (if applicable):** _____
- **Denomination (if any):** _____
- **Previous Church Membership (if any):** _____

Membership Details

- **Type of Membership:**
 - Individual
 - Family
 - Youth
 - Volunteer
- **Ministry Interest Areas:**
 - Worship
 - Outreach
 - Youth Programs

Prayer Groups

Other: _____

Emergency Contact Information

- **Name:** _____
- **Relationship:** _____
- **Contact Number:** _____

Declaration

I commit to supporting the mission and vision of the church and agree to participate actively in church activities.

Signature: _____

Date: _____