



Membership Application

Church Use	
Meeting with Pastor	Who: Date:
Elders Interview	Who: Date:
[] Application Approved	
_____ Pastor/Elder Signature	

Date submitted: _____

Please circle your campus: Gaylord Campus Sault Campus

Name: _____

Phone Number: _____

Address: _____

Occupation: _____

Marital Status: [] Single [] Married

List members of your immediate family

Spouse's name: _____

Children (with ages)

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

List church(es), if any, you have attended with the most recent listed first.

Name _____ (City, State) _____

Name _____ (City, State) _____

Name _____ (City, State) _____

[] Do you profess Jesus Christ as your Lord and Savior? (Please write out how you came to this decision; use a separate page)

[] yes [] no Have you been baptized? When and where? _____

[] yes [] no Have you read the Constitution of this church,
and the doctrinal statement of the Evangelical Free Church?

Do you have any questions about what you have read or comments to make?

[] yes [] no Do you understand and are in agreement with them?