



WOOSTER
GRACE

BAPTISM / MEMBERSHIP APPLICATION

4599-A Burbank Road
Wooster, OH 44691-9059

Name: _____ Birth Date ____/____/____
 First Middle Last

Address: _____
 Street and Apt. # City Zip

Phone: _____
 Home Cell E-mail

Place of Birth: _____

Occupation: _____

Marital Status : Single Married Divorced Separated
 Remarried Widow/Widower

Name of Spouse: _____ Anniversary Date: ____/____/____

Children:	Full Name	Birth Date	Grade	Name of School	Living at Home
1.	_____	____/____/____	_____	_____	_____
2.	_____	____/____/____	_____	_____	_____
3.	_____	____/____/____	_____	_____	_____
4.	_____	____/____/____	_____	_____	_____



- 1) Have you publicly identified with Jesus Christ as your Lord and Savior in one of our services?
Yes _____ No _____ Date _____
- 2) Have you been baptized by triune immersion since your decision to receive Christ? Yes _____ No _____
- 3) If no, will you agree to be obedient to the Lord in this ordinance? Yes _____ No _____
- 4) Are you planning to become a member of our church? Yes _____ No _____
- 5) Have you requested a letter of transfer from your previous church? Yes _____ No _____
- 6) If "no", do you wish to have us request it? Yes _____ No _____
- 7) Present Church Membership, if any: _____
Full Address: _____
- 8) Do you agree to submit to the Word of God and its administration by the leaders of Grace Brethren Church of Wooster? Yes _____ No _____
- 9) Have you read the Constitution of the Grace Brethren Church of Wooster? Yes _____ No _____

OFFICE USE ONLY	
Interviewed by Initial/Date	_____
Date of Baptism	_____
Date of Membership	_____

