

MEMBERSHIP APPLICATION Full Name: ___ Middle First Last Home Phone: Cell: _____ Birth Date: Email Address: Most Recent Membership: ______ Church Address: _____ How Long? Type of membership desired:) Active) Associate Have you read our church's constitution?) Yes) No Are you in agreement with JBC's constitution?) Yes) No Will you follow and submit yourself to the Word of God as the only rule of faith, doctrine and practice?) Yes Will you strive to follow the entreaties of Article VIII, Section A, Part 2 of the constitution?) Yes For our records only: Have you been water baptized?) Yes) No How were you baptized?) Immersion () Sprinkling Were you born again before you were baptized? () Yes) No I would prefer to be welcomed into membership at the following service:) 8:30 () 11:00 Sunday afternoon that would be convenient for me to meet with the elder board: _____

Please complete the reverse side of this form and return it to Trinka's mail slot (#41) or the wooden box next to the sound booth.. Thank you.

Briefly describe how you came to	faith belief in the work of Christ.
In your own words, tell on what y	ou rely for salvation (please cite Scripture).
In what areas of ministry have yo	u served at your previous church(s)?
In what areas of ministry do you f	feel you are gifted and would like to serve at JBC?
Signature:	Date:

If you would prefer to fill this application in a different format, you can, visit https://forms.gle/Vi1LA4XocuLXLLueA or use this QR code.

