



Living Grace Community Church. Post Office Box 21690 Bakersfield, CA 93309. 661-589-9734

- Male Mr. Miss
 Female Mrs. Ms.

Today's Date _____/_____/_____

Name: _____ Birth date: _____
First Middle Last

Address: _____

City, State, ZIP: _____

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ E-mail: _____

Marital Status: Single Married (Anniversary: _____) Separated Widowed

Name of Spouse: _____

Your Occupation: _____

Your Employer: _____

Children Living at Home:

Name	Age	Date of Birth

Name	Age	Date of Birth

Have you trusted Jesus Christ as your Lord and Savior? Yes No Not Sure

Have you been baptized since you professed faith in Christ? Yes No

If yes, date and location: _____

How long have you been regularly attending Living Grace Church?: _____

Are you presently – or were you previously – either a member or regular attender of another church? Yes No

If yes, please complete the following:

Name of Church: _____

Address: _____

City, State, ZIP _____

Phone: _____ Attendance: From _____ to _____

Reason for leaving _____

Have you ever been placed under church discipline? Yes No

If yes, please explain _____

Why do you want to join Living Grace Church? _____

Do you agree, by the grace of Christ, to fulfill the obligations of membership as described in the church Covenant of Membership, the churches Bylaws and Statement of Faith including faithful support of the church, submission to leadership, and a ministry of mutual support and encouragement to fellow members of the body? Yes No

Do you attend a home group? Yes No If yes, who is the leader? _____

Personal Testimony

The questions below will guide you through a clear presentation of your personal testimony of faith in Jesus Christ. Attach additional sheet if needed.

1. Give a brief description of your life before salvation. _____

2. Tell us the story of your conversion (please include the elements you understand to be requirements to be saved) _____

3. Give a brief description of your life since you have come to Christ. _____

4. Describe your ongoing relationship with God? _____

Ministry

Please describe any prior experience teaching or working with children and/or adults, including dates and locations:

Where are you currently serving in ministry at Living Grace (please include the leader's names)?

AFFIRMATION OF DOCTRINE, COVENANT OF MEMBERSHIP, BYLAWS, AND CHURCH DISTINCTIVES

These documents are available in booklet form, and also may be viewed at www.livinggracebakersfield.com

Doctrinal Affirmation: Check the appropriate statement and provide additional information if applicable.

- I have carefully read and affirm without reservation that I am in agreement with the doctrinal statement of Living Grace Community Church.
- I have carefully read the doctrinal statement but have reservations about certain areas because I have not yet had the time or opportunity to study them fully for myself. *(Please list these areas on a separate sheet.)*
- I have carefully read the doctrinal statement and after careful personal study of the subjects still have strong reservations about certain areas. *(Please list these areas and explain your views on a separate sheet.)*

Covenant of Membership and Bylaws Affirmation: Check the appropriate statement and provide additional information if applicable.

- I have carefully read and affirm without reservation that I am in agreement with the Covenant of Membership and Bylaws of Living Grace Community Church.
- I have carefully read the Covenant of Membership and Bylaws and have reservations about certain areas because I have not yet had the time or opportunity to study them fully for myself. *(Please list these areas on a separate sheet.)*
- I have carefully read the Covenant of Membership and Bylaws and after careful personal study of the subjects still have strong reservations about certain areas. *(Please list these areas and explain your views on a separate sheet.)*

Applicant's Signature: _____ Date: _____

Listener: _____ Date: _____

Listener's comments: _____

Elder's Signature: _____ Date: _____

Appl. Name _____
Doctrinal statement:
<input type="checkbox"/> Children or adults
<input type="checkbox"/> Children only
<i>FOR OFFICE USE</i>

*Please return completed application to the receptionist,
or mail it to the church, Attention: Membership.*

July 2010