PROVIDENCE
BIBLE FELLOWSHIP

Membership Application

Date: _____

Name: _____

Address: _____

Birth Date: _____

Home Phone: _____ **Cell Phone:** _____

Email: _____

Married: yes ____ **no** ____ **Wedding Date:** _____

Children: *Name* *Birth Date* *Notes*

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Other Family Information: _____

_____

Previous Church Membership: _____

Date of Baptism: _____ **Location:** _____

How were you introduced to Providence Bible Fellowship? _____

_____

When did you begin attending Providence Bible Fellowship? _____

Have you completed all 4 sessions of the Prospective Members Class? _____

What area(s) do you desire to serve in? _____

_____

I understand that my membership at Providence Bible Fellowship will be governed by the church according to its bylaws.

Signature: _____ *Date:* _____

PROVIDENCE
BIBLE FELLOWSHIP

Personal Testimony

Use this sheet to tell us about yourself (i.e. personal background/experience/testimony). If preferred, a typed document may be submitted.