



# MEMBERSHIP FORM

DATE	MONTH	YEAR

Surname and name: \_\_\_\_\_

Title (e.g. Mr/Mrs/Ms/Miss): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Age : \_\_\_\_\_

Physical address:

\_\_\_\_\_

\_\_\_\_\_ Postal code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ (W): \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Employment status (Employed/Unemployed/Self-employed): \_\_\_\_\_

Educational background: \_\_\_\_\_

Occupation/ Profession: \_\_\_\_\_

Marital status:  Single  Married  Separated  Divorced  Widow

Spouse name: \_\_\_\_\_

Number of children: \_\_\_\_\_

Children names and dates of birth:

\_\_\_\_\_

\_\_\_\_\_

List areas of your gifting /interest:

Ushering  Counselling  Teaching Singing  Intercessor  Worship

Children's ministry  Administration  Missionary work  Evangelism

Ushering  Media  Other: please specify \_\_\_\_\_

\_\_\_\_\_

Member:

\_\_\_\_\_

Date:



## NEW CONVERT FORM

Surname and Name: \_\_\_\_\_ Title (e.g. Mr/Mrs/Ms/Miss): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age : \_\_\_\_\_

DATE	MONTH	YEAR

Physical address: \_\_\_\_\_

\_\_\_\_\_ Postal code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ (W): \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

How did you get to know about this church?

\_\_\_\_\_

Will you be joining this ministry (Salvation Prayer Mission World-Wide) permanently?

Yes  No

If no, why? \_\_\_\_\_

Do you have any prayer requests?  Yes  No

If yes please elaborate: \_\_\_\_\_

\_\_\_\_\_

Who invited you? \_\_\_\_\_

\_\_\_\_\_

signature:

\_\_\_\_\_

Date: