

Calvary Chapel Membership Application

Personal Information		
Name:		
Address		
State	Zip	Phone:
E-Mail		
Are you at least 18 years old? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Have you personally trusted Christ for salvation? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Have you been baptized since trusting Christ? Yes <input type="checkbox"/> No <input type="checkbox"/>		
When were you baptized? (approximately)		

Personal Questionnaire
How long have you been coming to Calvary Chapel?
Statement of Faith: I have read and agree with the Statement of Faith What areas in the Statement do you have some disagreement if any?
Statement of Values: I have read and agree with the Statement of Values What areas in the Statement do you have some disagreement if any?

I agree to the requirements for membership of Calvary Chapel and commit to following Christ, seeking to obey his commandments, and submitting to the Holy Spirit leading me through the Body of Christ at Calvary Chapel.

Signature: _____

Date: _____

Recommended by: _____

Date: _____

Elder/Pastor

Review and Approval:

Approved by the Board of Elders:

Yes: ☐

No: ☐

Secretary

Date