



For as the body is one and has many members, but all the members of that one body, being many, are one body, so also is Christ. 1 Corinthians 12:12

Membership Application Form		
Applicant Information		
Surname:		Given Name:
Date of Birth:	Anniversary:	Phone:
Cell:	Email:	
Current Address:		
City:	Province:	Postal Code:
Marital Status:	Occupation:	
Church Membership History		
Name of Church (previously attended):		Address
How long?	Did you leave amicably? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If no, please explain below:		
In what ways do you desire to serve at Miracle Temple Ministries		What are your interests?
What are your qualifications?	What are your gifts?	Ministry you would like to serve?
Position?	Availability? Sunday <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/>	
Emergency Contact		
Name:		Relationship:
Address:		Phone:
City:	Province:	Postal Code:
Spouse Information		
Surname:		Given Name:
Date of birth:	Anniversary:	Cell:
Email:	What are your interests?	What are your qualifications?
In what ways do you desire to serve at MTM	What are your gifts?	Ministry you would like to serve?
Position?	Availability? Sunday <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly <input type="checkbox"/>	
References		
Name	Address	Phone



Membership Application Form

Names of Children (if attending church)

* Please note this applies to minor children. Any person over 18yrs must complete their own application

Name	Name
Date of Birth	Date of Birth
Name	Name
Date of Birth	Date of Birth

Membership Application

The information provided is true and to the best of my knowledge. As a member of KCLC, I will seek to fulfil the membership responsibilities to the best of my ability, and will endeavour to fulfil the vision; "Loving You Back to Life and Destiny".

SIGNATURE(S)

Signature of applicant:	Date:
Signature of spouse <i>(only if for a joint membership)</i> :	Date:

Have you been baptized? Yes No If not, do you wish to be? Yes No (If No please explain)

Please return this completed page with your membership information from the previous page. Is there anything else you would like to share?

Office Use Only

Received date: ____/____/____

Interview by Leadership Team ____/____/____

Data Entry: ____/____/____

Leadership Team Recommendation: