

Hope Church

Membership Form

Name _____ DOB _____

Address _____

Phone _____

Email _____

Spouse's Name _____ DOB _____

Phone _____

Email _____

	Name	Birthdate	Attends?
Child #1			
Child #2			
Child #3			
Child #4			
Child #5			
Child #6			

- I affirm the statement of faith of Hope Church.
- I affirm the Hope Church covenant.
- I have been baptized by immersion or plan to at the next opportunity.
- I affirm that I am in good standing with other church bodies I may be coming from. I will seek the counsel of the church leadership with any related concerns.

SIGNATURE _____ DATE _____

SPOUSE'S
SIGNATURE _____ DATE _____