

Membership Application

□ New Member	□ Recommitting Member
Member Information (please print)	
Full Name:	
Birthday (mm/dd):	Phone:
Mailing Address:	
City, State, Zip Code:	
Email:	
	our areas of interest, please check any areas
☐ Welcoming Team	
☐ Daily Word & Sunday Service	
□ Prayer Team	
☐ Flowers	
☐ Coffee Crew & Kitchen	
☐ Maintenance & Landscaping	
☐ Youth Program	
\square Board of Directors	
□ Other	
Permission to include you in our weekly nev (please check YES if already subscribed)	/sletter: □ Yes □ No
Signature:	Date:



*Return completed applications to any member of our admin or board team.