

RCF Membership Application					
	A	Applicant Info	rmation		
Last Name:					
First Name:					
Date of birth :		Cell Phone:			Home Phone:
(MMM DD, YYYY)					
Address:		1			
City:	Province:			Postal Code:	
Email:					
Church Membership Information					
Baptized On:	Ву:			Church	:
(MMM DD, YYYY)					
The church I am currently a member	er of:				
Current and previous positions and	d activities in the	church (start with	h the most re	cent o	nes):
		Marital St	atue		
Circle one: Single	Married	Divo			Widower
Spouse Name:	Married	DIVO	rceu	Phon	
Spouse Nume.		Childre	n.	1 1101	le.
Name					Date of Birth (MMM DD, YYYY)
Signature					
Please consider my application. I h	ave received the			reeme	ent in both Word and Spirit. As a member
of RCF church I will abide by these					
Signature of applicant:				Date	:
				MMM DD, YYYY	
		Board Use	Only		
				(use th	ne back of this page if needed):
	M	MM DD, YYYY			
		,			
Approved: YES / NO					
Signatures of board members					
Name:				Date:	
Name:				Date	