Calvary Mennonite Fellowship Membership Application



Individual Form

Full Name:				
Phone Number:	E-mail Address:			
What is the latest time you prefer to receive calls in the evening?				
Date of Interview:	Date Approved:			

Family

Marriage Status:	Wedding Date:	Notes:	
Children & ages:			

Church Information

Date of Conversion:	Date Baptized:		
Previous Church			
Prior Church Experience/			
Reasons for leaving:			
How were you			
introduced to CMF?			
Began Attending:			
Why do you want to be a m	iember of Calvary?		

Brief Spiritual Pilgrimage: Highlights, conversion, challenges

(Continue on back page, if necessary)

Briefly	v explain	your understa	nding of the	Gospel:

• In what ways would you be willing to participate in church services, congregational activities, or service to others with your giftings? ______

Please give this completed form to one of the Leadership Team. The Leadership Team will set up an interview with you as the next step in the application process.