

Zion Baptist Church Membership and Decision Record

Name: _____ Date: _____
Title First Middle/Maiden Last Suffix
(Dr., Rev., Min., Mr., Mrs., Ms., Miss)
Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Fax: _____ Work Phone: _____ Fax: _____
Cell Phone: _____ Emergency Phone: _____
Email Address: _____
Marital Status: Married Divorced Single Widow/Widower
 Male Female
Occupation: _____
Birthdate: ____/____/____ Marriage Date: ____/____/____ Spouse: _____
MM/DD/YYYY MM/DD/YYYY
Hobbies: _____

Makes the Following Public Commitment:

- Accepts Christ as Personal Savior and Lord
 Desires Membership in this Church by: Baptism: ____/____/____
 Christian Experience: ____/____/____ Watchcare: ____/____/____
 Letter from: _____: ____/____/____

Envelope Number: _____ Deacon: _____
Church, City, State
(Assigned by church) (Assigned by church)