

**ALDERSHOT NEW TESTAMENT
CHURCH OF GOD**



Minister: Revd Malcolm Cummins
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ALDERSHOT
HANTS
GU11 1SH

**MEMBERSHIP APPLICATION
FORM**

Title (Mrs/Miss/Mr/Master/Other)	
Full Name	
Date of Birth	
Address	
Post Code	
Telephone Numbers	Home : Mobile: Work :
Nationality	
Are you born again and baptised in water, in the Name of the Father, Son and Holy Ghost?	
If so, when and in which church?	
Have you ever been a member of any other Church?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes which one/ones? Name & Address	
If you are related to any current member of this church state their Name(s) What is your relationship to them (i.e. wife/husband/sister	

/cousin. etc)	
State why you would like to be a member of the Aldershot New Testament Church of God	You may use the other side of this sheet to answer this question.
What is your employment status? (Please tick the appropriate box)	<input type="checkbox"/> A Student <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired Other: (please state)
What is your current occupation?	
Job title	
What skills do you have which could be of use to this church? Please include details of your current occupation.	

Signed:.....

Dated:.....

Thank you for taking the time to complete this application.
Please ensure that all questions are answered where applicable
Please read the following notes carefully.

- *Please give this form, fully completed to Pastor Malcolm Cummins or any member of the Evangelism Team.*
- *Please note that in order to become a member of this church you will need to attend Membership Classes.*
- *We shall write to you confirming receipt of your application and informing you of the date of the next Membership Class sessions.*