

**BEACON OF HOPE
MEMBERSHIP QUESTIONNAIRE**

NAME: _____ Date of Birth: _____

PRIMARY ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: (H) _____ (W) _____

SECONDARY ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: (H) _____

MARITAL STATUS: (circle one) S M SPOUSE
: _____

CHILDREN

Name: _____ Date of Birth: _____ Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____ Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____ Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____ Name: _____ Date of Birth: _____

I am coming today to: (circle & fill in the blank as requested)

1. Join this church by transfer of letter from another church. I am currently a member in good standing at:

Name of Church: _____

Address of Church: _____

Telephone Number and Contact: _____

2. Join this church body by confession that I have repented of my sins, believed on the Lord Jesus Christ as my Lord and Savior and have previously been baptized post conversion.

Please write a brief summary of the gospel message. What must someone know in order to be saved?

Please give a brief testimony of your repentance and belief in Christ as Lord and Savior.

Have you been baptized since salvation? _____ If yes, when? _____

In what ways do you see proof (or “fruit”) of salvation present in your life since your profession?

In what areas of ministry do you most desire to serve?

Steps in Becoming a Member of Beacon of Hope

Profession of salvation

Post salvation baptism

Interview with an elder of BoH

Read “What We Teach” (see beaconforthecity.org)

Affirm by signature the “Congregational Affirmation of Faith”

And the “Relational Commitments”