

RESTORATION EVANGELICAL MINISTRY

Fill out and return the following information:

I have received Jesus Christ as my Saviour and Lord, baptized by holly spirit and water, desire to become an active member and support the ministries of this Church. Therefore, I hereby apply for a membership.

** Mandatory Fields*

First name and Surname *		
Physical Address *		
Gender *		
Marital Status *		
Date of Birth *		
Cell Phone *		
Home Phone		
Work Phone		
Contacts of other family *		
Email		
Occupation		
Church previously attended		
Family Members in your current household	Relationship	Birth dates

Please write your personal testimony of how you came to Christ at the back. Have you been baptized (date) ----- if not, do you wish to be ☐ Yes ☐ No. What ways do you desire to serve within our church family (based on your interests, abilities, gifts and time)?

Signature: ----- Date: -----

Note: Our Church REM allow for membership transfer from other related Churches. Please submit a separate membership application form for each individual to the church office. Your personal information will be kept confidential by the church office.