



Membership Application

BACKGROUND: (Spouses should fill out separate application)

Name: _____ Nickname: _____

Address: _____ City: _____

State: _____ Zip: _____ Email: _____

Home Phone: _____ Work Phone: _____

Cell Number: _____ Date of Birth: _____

____ Male _____ Female

Marital Status: ___ Single ___ Married ___ Divorced ___ Widowed ___ Separated

Spouse's Name: _____

Children's Names and ages:

Experience: (If more space is needed please use the reverse side of the application)

How long have you been attending RLF?

Are you a member of another church (if "YES" please explain where)

Have you been baptized? If "NO" are you willing to be baptized?

Have you received Jesus Christ into your life as Savior and Lord?

How has your life changed since receiving Christ and what was your life like before receiving Christ?

How are you growing in your relationship with Jesus Christ?

How are you sharing the message of Jesus Christ?

Have you read the partnership handbook, and if so, do you wholeheartedly and without reservation endorse the doctrinal statements of Restored Life Fellowship?

Have you attended a partnership orientation?

Signature: _____

Date: _____