



MEMBERSHIP INTERVIEW

Applicant's Full Name: _____

Mobile (____) ____-____ Email: _____@_____._____

Date of Birth: ____/____/____ Married, Anniversary ____/____/____ Single
 Widowed Separated Divorced

Spouse Name _____ Date of Birth: ____/____/____

Child 1 _____ Date of Birth: ____/____/____

Child 2 _____ Date of Birth: ____/____/____

Child 3 _____ Date of Birth: ____/____/____

List any additional children/household members on back of the page.

Home Address: _____ (____) ____-____

City: _____ State ____ ZIP _____

Mailing Address: _____

City: _____ State ____ ZIP _____

Converted/Saved: ____/____/____ Baptized in Water: ____/____/____

Baptized with the Holy Spirit: ____/____/____ Membership Class: ____/____/____

Testimony: _____

Employer: _____ (____) ____-____

Employer's Address: _____ Position: _____

Life Group Leader's Name: _____

Ministry/ies involved in: _____

Read Kings' Cathedral's Statement of Faith – 16 Foundational Truths **(see attached)**.

Applicant's Initial of Receipt: _____

Are you living a consistent holy life according to 1 Corinthians 6:9-10, Galatians 5:19-21, Ephesians 5:3-9? _____ Adultery? Fornication? Homosexuality? Drugs? Pornography?

Are you a tithing to King's Cathedral? _____ Do you regularly attend services? _____

Pray God's blessing upon entire family and home.

Write any additional comments on the back of this page.

Interviewer: _____ Date: ____/____/____

Revised June 30, 2019

Does applicant want to be baptized? Yes No Which service will they attend to be prayed in? (circle 1) 7AM 9:30AM 6PM Wed
