



MEMBERSHIP APPLICATION FORM

1415 Trafalgar Road, Oakville, ON L6H 4R7

www.faithoakville.ca *

Name _____

Address _____

Email _____ Phone #(s) _____

- Have you signed up to receive our weekly newsletter?*
- Yes _____ No _____
- Have you joined Faith's Online Directory?*
- Yes _____ No _____

1. Have you trusted Jesus Christ as your personal Lord and Saviour?

Yes _____ No _____ Not sure, but would like to know for sure _____

If "Yes", please share how you came to know the Lord and the ways it has impacted your life.

2. Have you been baptized by immersion since you became a believer? When?

3. Have you read and can you affirm the Church's Statement of Faith? Do you have any questions?

4. What brought you to Faith Baptist? Have you attended church elsewhere? If so, where?

5. Why would you like to become a member of Faith Baptist Church?

6. Is there something we can pray for you about?

7. Where/How might you lend your talents to serve here at Faith?

1) _____ 2) _____ 3) _____