



MEMBERSHIP APPLICATION

BETHLEHEM LUTHERAN CHURCH

Please complete this application and return it to the church office. Also, please sign the reverse side so your application can be presented to the Elders. The church does appreciate your help in keeping the church records as complete as possible. All information given is confidential.

Name _____
Last First Middle

Prefers to be called _____ Phone # _____ Cell # _____

Present Address _____ Zip _____

Email address _____ Work email _____

Date of Birth _____ Place of Birth (City, State) _____

Your father's full name _____

Your mother's full name (include maiden name) _____

Date of Baptism _____ Baptized by Pastor _____

Church, city and state in which you were baptized _____

Confirmation Date _____ Confirmation Verse _____ Pastor _____

Church, city and state in which you were confirmed _____

Date of first marriage _____ Married to (full name) _____

Church, city and state of first marriage _____

Spouse died (circle: Yes No) Date _____ Divorced (circle: Yes No) Date _____

Second marriage date _____ Married to (full name) _____

Church, city and state of second marriage _____

Spouse died (circle: Yes No) Date _____ Divorced (circle: Yes No) Date _____

If there are other marriages, please indicate _____

Place of Employment _____

Phone Number _____ Job /Position/Title _____

CHILDREN YOU WISH TO BECOME MEMBERS (List children on the head of household's form only.)

1. _____
Last Name First Middle Birth date Place of Birth

Baptism Date Church, City, State baptism took place

2. _____
Last Name First Middle Birth date Place of Birth

Baptism Date Church, City, State baptism took place

3. _____
Last Name First Middle Birth date Place of Birth

Baptism Date Church, City, State baptism took place

LIST ADDITIONAL CHILDREN ON ANOTHER APPLICATION.

Do you belong to a lodge or secret organization? (circle: Yes No) If yes, which _____

PAST COMMUNION MEMBERSHIP OF OTHER CHURCHES (Please list)

1. _____
Church (most recent first) City, State Pastor No. of Years

2. _____
Church City, State Pastor No. of Years

I, _____, after prayerful consideration, desire to become a member of Bethlehem Evangelical Lutheran Church, Saginaw, Michigan, and to affiliate with the Lutheran Church, Missouri Synod. I am fully convinced that in the Evangelical Lutheran Church, the Word of God is taught in truth and purity, and that the Sacraments are administered according to the institution of Christ. I now dedicate myself to Christ and to serving Him through this congregation by regularly attending worship, partaking of Holy Communion frequently, and contributing to the financial support of this congregation.

Signed _____ Date _____

FOR CHURCH USE ONLY

Approved for membership by Pastor _____ Date _____

Received by _____

Date Received _____