



Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Please confirm:

I believe in Jesus Christ as my personal Saviour and Lord.

I was baptized as a believer in _____ (year)

Please provide the name and address of the church where you were baptized:

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

If you are currently a member of a different church and would like to transfer your membership to Bromley Road Baptist Church, please provide the name and address of your current church:

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Please confirm that you have received a copy of the Bromley Road Baptist Church Operating By-law No. 2.

Received Initials: _____

I ask to become a Full Member of Bromley Road Baptist Church based on my Christian experience.

Signature: _____

Printed Name: _____ Date: _____

Office Use Only	
Deacons Conducting Interview:	Date Approval Motion Passed by Deacons (DD/MM/YY):
1. _____	
2. _____	
Date Received into Membership (DD/MM/YY):	Form Distributed to Office and Membership Secretary (DD/MM/YY):