



Having personally experienced the new birth through faith in the atoning blood of the Lord Jesus Christ and being in agreement with the doctrines and practices of this church, it is my desire to be associated with those of like precious faith in Christian fellowship. I hereby apply for partnership at Centerpoint Community Church.

Mr. _____
Mrs. _____
Miss _____ Spouse's Name _____

Date of Birth (self) _____ Date of Birth (spouse) _____

Place of Birth (self) _____ Place of Birth (spouse) _____

Children: Names & Date of Birth

#1 _____

#2 _____

#3 _____

#4 _____

#5 _____

If necessary, please use a separate piece of paper to add more family members.

Street Address _____

Mailing Address _____
(If different from street address)

City _____ State _____ Zip Code _____

Home Phone Number _____ E-mail address _____

Cell Phone Number _____ Spouse cell phone _____

Occupation (self) _____ Spouse (if applicable) _____

Marital Status: Single _____ Married _____ Date: _____
Widowed _____
Divorced _____ Date: _____
Remarried _____ Date: _____



Application for Partnership

Date of Conversion _____

Baptized in Water? Yes _____ No _____ Baptized in the Holy Spirit? Yes _____ No _____

Membership in a previous church: Yes _____ No _____

(If yes) Name of church previously a member in: _____

Is above church an Assembly of God Church? Yes _____ No _____

Address _____

City _____ State _____ Zip Code _____

Telephone Number of above church _____

Please check here to send for a letter of transfer from above church _____

Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____