



# IN-HOUSE CHRISTIAN FOURSQUARE CHURCH

# MEMBERSHIP

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Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you received the Lord Jesus Christ as your personal Lord and Saviour? YES / NO

When? \_\_\_\_\_

Have you been Water Baptized? YES / NO When? \_\_\_\_\_

When did you start regularly attending In-House? \_\_\_\_\_

Have you read and agree to Foursquare's This We Believe? YES / NO

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Signed: \_\_\_\_\_ Print name: \_\_\_\_\_

Date Signed: \_\_\_\_\_

