## THE ANGLICAN CHURCH OF KENYA DIOCESE OF THIKA MUGUMO-INI PARISH P.O BOX 2713-01000 THIKA

## MEMBERSHIP APPLICATION FORM TICK OR FILL WHERE NECESSARY

## **APPLICANTS DETAILS**

Your Full Name:
AddressCell Phone
ProfessionEmployerEmployer
Age: 18yrs-25yrs 26yrs – 35yrs 36yrs – 45yrs 46yrs – 59yrs 60 and Above
Which Diocese do you come from?
Baptized? YesNoWhen?Where?By who?
Confirmed? YesNoWhen?Where?By who?
Do you receive Holy Communion YesNoNo
MARITAL STATUS
Single Married Divorced/Separated Widow/Widower
If married, please specify the form of marriage
Christian marriage Yes/NoWhen?Where?
Customary marriage Yes/NoWhen?Where?
Other (specify)
SPOUSE DETAILS
NameOccupation
Cell PhoneEmployer
Name of Children Under 18 years
1Baptized Yes/No Confirmed Yes/No
2Baptized Yes/No Confirmed Yes/No
3Baptized Yes/No Confirmed Yes/No
4Baptized Yes/No Confirmed Yes/No
PREFERRED SERVICES: Kiswahili English Kikuyu
CHURCH GROUP MEMBERSHIP
Are you enrolled in KAMA, Mothers' Union, KAYO, Brigade YesOR NoOR No
Do you wish to be enrolled as a member of KAMAMothers' Union KAYO Brigade
Residential areaHouse No
Your Prayer Cell Group's Name
How long have you been a member of this Church? 0-1 years 2-5 years 5 years and above
SHARING TIME AND TALENTS
Please tick any of the following you wish to participate:
Preaching Leading service Intercessory/Ushering Choir
Youth Work Mission Sunday school Teacher Others(specify)
Bible Study Praise& Worship Reading Bible Lessons
<u>DECLARATION</u>
I promise to be faithful and committed member of this Church, to protect its dignity and that I shall
faithfully and regularly be giving my Tithe, Offering, First fruits and any other donation. God being my
helper. AMEN.
Membership No(If Applicable)
SignatureDate
FOR OFFICIAL USE ONLY
Received by the Vicar onSignatureOffice StampOffice Stamp