ALL CHRISTIANS' FELLOWSHIP INTERNATIONAL

BAPTISMAL APPLICATION FORM

| SECTION A | | |
|---|---|--|
| 1 HAVE YOU ACCEPTED T | THE LORD JESUS AS YOUR PERSONAL SAVIOUR? YES/NO | |
| | WHERE | |
| 2. HAVE YOU READ THROU IN OUR WEB SITE (www.a | JGH OUR DOCRINAL STATEMENT, BELIEFS AND MISSION AS STATED acfiministries.com)? YES/NO DO YOU AGREE WITH THEM? YES/NO MMENT ON WHAT YOU HAVE READ IN IT? | |
| {You may request for | r printed copies of our Doctrinal Statement, Beliefs and Mission from the Usher} | |
| 3. WHO ARE YOU LIVING V | WITH (ALONE, FAMILY, FRIENDS, RRELATIONS)? | |
| 4. YOUR DENOMINATION OR MINISTRY BEFORE NOW? | | |
| 5. HAVE YOU REGISTERED AS A REGULAR MEMBER OF THIS CHURCH? YES / NO | | |
| (Please note that, it is Biblical | to desire to be a regular member before been baptised by a Church). | |
| 6. YOUR PRESENT JOB / PR | OFESSION | |
| 7. MARITAL STATUS: SIN | IGLE / ENGAGED / MARRIED | |
| 8. HAVE YOU EXPERIENCED THE BAPTISM OF HOLY GHOST? YES / NO WHEN | | |
| 9. HAVE YOU ATTENDED I | BAPTISMAL LESSONS BEFORE NOW? YES / NO | |
| WHAT YEAR? | WHERE? | |
| | TO CREATE TIME TO ATTEND THE BAPTISMAL CLASSES TO BE INISTRY? YES / NO | |
| | <u>-</u> | |
| | - | |
| | SECTION B | |
| 1. SURNAME: | <u>-</u> | |
| 2. OTHER NAMES: | SEX: | |
| 3. ADDRESS: | POST-CODE: | |
| CITY: | TELEPHONE NUMBER/S: | |
| 4. DATE OF BIRTH: | PLACE OF BIRTH: | |
| 5. NATIONALITY: | | |
| | | |

| SECTION C | | |
|-----------|------------|--|
| I | | |
| SIGNATURE | DATE | |
| FOR OFFIC | E USE ONLY | |