Date		
Date		

Church Membership Application Bethel Baptist Temple * 8501 Plainfield Road, Cincinnati, Ohio 45103 * 513 891-2221* bethelbaptisttemple.org

Name						
Address_		Last				
Phone ()	City	State	Zip Code			
Email						
Names of Family Members:	Date of Birth	Approximate Date of Salvation	Where and When Baptized by Immersion			
	e will request	ter or Statement? a church letter from you ating that you have been s	-			
If by Letter, name and address of Church you are coming from.						
Positions of service and responsibilities at previous churches:						

 Are you in agreement with the Statement of Faith of Bethel Baptist Temple? (Shttp://bbtcincinnati.virb.com/statement-of-faith) Yes No Mostly 	ee
If not, please express any questions or differences.	
3. In what areas or ministries would you and your family like to serve in the church	?
4. Why do you wish to become a member of the Bethel Baptist Temple?	
5. Do you believe immorality, unscriptural teaching, and sowing of discord are reas dismissal as a Church member?	
the spiritual protection of this church?	ursen) under
If Married: We have prayed about this decision and believe it is God's direction for our SIGNED (husband)	family.
Date SIGNED (wife)	
SIGNED (wife)	
If Single: I have prayed about this decision and believe it is God's direction for SIGNED	r my life.
Date	