Schoharie Valley Gospel Church
Membership application

Applicant's Full Name:_____
(First) ("Goes by") (MI) (Last)

Male o Female o Birth date:_____

Mailing Address:_____

City/State/Zip:_____ E-mail:_____

Phone/s: Home:(___)_____ Work:(___)_____ Cell:(___)_____

Marital Status: ❑ Married Anniversary Date:_____ (Please include year)
❑ Single ❑ Separated ❑ Divorced ❑ Widowed

Place of Employment:_____Occupation:_____

FAMILY INFORMATION:

Spouse's Full Name:_____
(First) ("Goes by") (MI) (Last)

Birth date: _____ Cell phone:_____ E-mail:_____

Place of Employment:_____Occupation:_____

Work Phone: (___)_____

Is your spouse applying for membership with you? (Spouse to fill out separate Application) ❑ Yes ❑ No

Children's Names: (Only list those children under 17 years of age who will be included in your family membership)

	First:	Last:	Age:	Sex:	Birth date:	Grade:
1.						
2.						
3.						
4.						

PERSONAL INFORMATION:

1. How long have you lived in Schoharie county/Schenectady county/Montgomery county?
   Other_____; _____

2. When did you first visit Schoharie Valley Gospel Church and how were you introduced to SVGC? ❑ Friend ❑ Website ❑ Phone Book ❑ Family member ❑ Other _____

   Date of first visit:_____

3. Please list the churches of which you have formerly been a part, starting with the most recent: (Use separate sheet of paper if necessary)

   Church Name: Denomination: Length of Attendance: Reason for Leaving:

   _____

   _____

   _____

4. Please describe your conversion to Christ. Include any previous religious background and the events that led to your personal experience of the New Birth in Jesus Christ. (Be as brief as possible, but include the approximate date you were born-again.)

   Applicant: Date Born-Again _____

   _____

   _____

   _____

   Spouse: Date Born-Again _____

   _____

   _____

5. Have all those in your immediate family received Christ? ❑ Yes ❑ No
   If not, to your knowledge, who has not yet received Christ?

   _____ _____

6. Have you been baptized in water by immersion?

   Applicant: ❑ Yes ❑ No Approx. Date_____

   Spouse: ❑ Yes ❑ No Approx. Date_____

   Children: ❑ Yes ❑ No Approx. Date_____

7. Have you received the baptism in the Holy Spirit by faith, with the evidence of speaking in other tongues?

   Applicant: ❑ Yes ❑ No

   Spouse: ❑ Yes ❑ No

   Children: ❑ Yes ❑ No

8. Are you willing to faithfully support the ministry of this church with your prayers, dedication and finances as God enables and directs you?

❑ Yes ❑ No

9. Are you willing to be involved in this Church family as God leads you with your time, gifting and abilities?

❑ Yes ❑ No

Please list your gifting and abilities that you would serve the Lord with here at SVGC:

_____

_____

Have you taken a Spiritual Gift Assessment test located on our website? ❑ Yes ❑ No

10. Do you share and embrace the Church's Mission, Vision and Values for church growth, evangelism and making disciples?

❑ Yes ❑ No

11. Do understand and agree with our Statement of Faith? (On our Church Website: svgchurch.org)

❑ Yes ❑ No

If not, in what area(s) are you not in agreement?_____

12. Have you taken the Membership Class?

❑ Yes ❑ No

13. Have you attended Schoharie Valley Church faithfully for at least 3 months?

❑ Yes ❑ No

If not, how long have you been a regular attendee?_____

14. Do you understand that your membership rights may be suspended or revoked as deemed necessary by the senior pastor/elders of this church through unrepentant and ongoing violation of scriptural principles and refusal to undergo any redemptive restoration through counseling and meeting with the senior pastor or if you become inactive by nonattendance for a period of more than three months (exceptions may be made for those with summer/winter homes out of town or those who travel extensively for business, etc.)?

❑ Yes ❑ No

15. Do you understand that your membership at Schoharie Valley Gospel Church is completely voluntary and you are free to withdraw your membership at any time for any reason?

❑ Yes ❑ No

16. Will you give the Senior Pastor of SVGC the honor of a personal meeting with you if at any time in the future you decide to withdraw your membership from this church family?

❑ Yes ❑ No

17. Will you seek out counsel from the senior pastor if you have any difficulty, an offense or disagreement pertaining to the ministry at SVGC? (Our heart is to walk in agreement as much as possible and maintain an attitude of love, reconciliation and to work through any challenge in a scriptural and godly way.

❑ Yes ❑ No

18. Do you understand that photos and/or video footage taken at church services and events may include you and your family? Do you give your permission for said images to be used for promotional materials, TV programs, advertising, website development, video production and/or publications?

❑ Yes ❑ No

19. Will you agree meeting with the Senior Pastor for a membership interview prior to signing membership form? (The purpose is just a time to get to know you better and to pray with you as you move forward to become a member at SVCG.)

❑ Yes ❑ No

20. I have completed the "Application for Church Membership" at SVGC, have taken the Membership Class and understand the rights and responsibilities that are mine. I do hereby voluntarily request to be received into membership at **Schoharie Valley Gospel Church** of located at 133 Sprakers Road, Sloansville NY 12160 as indicated by my signature below:

Signature:_____ Date:_____

Pastor Approval Signature:_____ Date:_____

Brought forward and received into membership before congregation: Date:_____