

Mustard Seed Street Church
625 Queens Avenue
Victoria, BC
V8T 1L9

Application for Membership

Name: _____ Phone: _____

Address: _____

Date of Birth: _____ Date of Immersion Baptism: _____

Place of Immersion Baptism as a Believer: _____

Baptized By: _____

Name and Address of Church where present membership is held (if any):

Please return your completed application to the Church Life Committee after which you will be contacted for an interview to discuss matters relating to your personal Christian experience and your involvement with the church.

Applicants Signature: _____ Date: _____

Interviewers: _____ Date of Interview: _____

Acceptance Into Membership: _____ Pastor: _____