## September 1, 2020

## APPLICATION FOR MEMBERSHIP

## Islands Community Church, Friday Harbor, WA

Perso	onal I	ntorma	ition:						
Name	(□ Mr	., □ Mrs	., □ Miss)				_		
			(please print – full						
Email:					Phone:	(home phone)			
Address:					Phone:	· · · · ·			
City:		State:			Zip:	(cell phone)			
Birth Date:		Anniversary:							
Marital Statu		s:	☐ Single	☐ Married	□ Divorced		applicable) v/Widower		
Spous	. <u>[</u>			(if applicable)			_		
A - Partir - Nieta-									
Application Notes:									
	<ol> <li>Upon submission of this application for membership to the Pastor or an Elder, you will be requested to share a brief statement of your faith in Christ as your personal Savior.</li> <li>After completion of this form and satisfactory completion of the membership interview (noted in 1 &amp; 2), your name will be placed before the congregation to be affirmed into membership.</li> </ol>								
Questionnaire:									
1. Previous Church Membership: (name of church, city, state)									
2.	□ Yes □ No								
3.	□ Yes □ No	contained in the Islands ( ommunity ( hurch ( onstitution &							
4.	☐ Yes or ☐ Have you read, and do you agree to abide by the Covenant contained in the ICC Constitution & Bylaws?				Covenant				



Application:							
I am submitting this application today to join in fellowship with Islands Community Church (check one):							
<ol> <li>□ By confession that I have repented Christ as my Lord and Savior.</li> </ol>	ed of my sins, believed in the Lord Jesus						
2. ☐ By letter of transfer from another Bible-believing church of like faith and practice.							
3. □ By restoration, having previously Constitutional process ( <i>conditions ap</i>	• •						
Membership Commitment:							
I, the undersigned party, wish to become a member of the Islands Community Church in Friday Harbor, WA. I have read the church Constitution & Bylaws, including those sections dealing with membership. I understand that this church is governed by these documents, and I hereby agree to be bound by the policies and procedures outlined in them.							
(signature of the prospective member)	(date)						
(parent or guardian for a minor)	(date)						
(parent of guardian for a fillion)	(uate)						
Church Office Use Only							
Membership Process Checklist							
1. ☐ Application Received	2. □ Interview Completed						
Date:	Date:						
3. □ Church Affirmation	Pastor/Elder Sponsor						
Date:	(print pame) (date as besitted to the effect)						
	(print name) (date submitted to the office)						

