Welcome to Miracle Life Family Church Membership Class Application Process! You are about to make an important decision concerning your church family. In order to help you through the Membership Process, PLEASE READ THE FOLLOWING INFORMATION CAREFULLY BEFORE COMPLETING THE APPLICATION FORM.

MLFC Membership Classes are scheduled three times a year. The next membership class is on Saturday, 21st January, 2017 from 13:00 - 16:00 Hrs. On the day of the class, please register and be seated by 12:50 Hrs.

THE APPLICATION FORM

1. Please complete all information in the Application Form. Incomplete Application Forms will not be processed. This means that you will have to re-submit your application in our next intake and will not be able to attend the class applied for.

2. Attachments required:
   - If you have been a member of another bible believing church within Lusaka and wish to join us, please provide a letter of release from the Pastor along with your application form. If you cannot provide one, please hold off your application until you can obtain one.
   - Please include a passport sized photograph of yourself and family members who are applying for membership. Having a picture will aid Pastors and Leadership to get to know you. Please write the appropriate name at the back of the picture.

3. Please submit your completed form at the church reception desk during the week between 08:00 and 17:00 Hrs or on Sundays at the SFL Desk in the Foyer. Deadline for submission of applications is Wednesday, 4th January, 2017 by 17:00 Hrs. Any applications received after this date will be deferred to the next membership class.

4. The Class list will be available at the SFL Desk in the foyer on Sunday, 15th January, 2017. Please ensure that your name is on the list as only those names that appear on the list will be registered for the membership class on Saturday, 21st January, 2017.

*If your name has been approved & you miss the class, you will be deferred to the next class. However, should you miss that class as well, you will have to re-apply.

** Please take note that anyone who comes 10 minutes late will not be able to attend the class.
Date: _____________________

Applying for:  

☐ Regular Membership
☐ Associate Membership (short term residence in Lusaka)

Applying for:  

☐ Family (husband and wife both becoming members)
☐ Individual (aged 18 and over)

HOUSEHOLD INFORMATION
(if married couple is applying together, please place husband’s information here and spouse’s information below)

Applicant’s Surname: _________________________ Other Names: _____________________________

Mailing Address: __________________________________________________________________________

Physical Address: ______________________________________ ____________________________

City/Township: ______________________________ Phone (Cell): ____________________________

Phone (Work): ___________________________ Phone (Home): _____________________________

Email Address: ____________________________ Birthday (day/month/year): ______________________

Occupation: _______________________________________________________________________

Place of Employment: ______________________ Position: ________________________________

☐ Male  ☐ Female  Nationality: ____________________________

Marital Status:  

☐ Married  ☐ Separated  ☐ Single  ☐ Divorced  Anniversary (day/month/year): ______________________

SPOUSE’S INFORMATION
(if married, please fill out, whether your spouse is applying for membership or not, and if separated please still include your spouse’s details as you are still legally married)

Is your spouse applying for membership with you?  ☐ Yes  ☐ No

Spouse’s Surname: _________________________ Other Names: _____________________________

Phone (Work): ___________________________ Phone (Cell): _____________________________

Email Address: ____________________________ Birthday (day/month/year): ______________________

Occupation: _______________________________________________________________________

Place of Employment: ______________________ Position: ________________________________

Sex:  ☐ Male  ☐ Female  Nationality: ____________________________

Children’s Names (only list those under 18 years who will be included in your membership)

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<tr>
<th>NAME</th>
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How long have you lived in the Lusaka area? ____________________________________________________

State the month, date and year that you first visited Miracle Life Family Church _______________________

How were you introduced to Miracle Life Family Church (MLFC)? ________________________________

List the names of churches that you have been a part of before coming to MLFC beginning with the church you first attended. A letter of release is required if you have been a member of another church within Lusaka. Complete information below as follows: name/s of church, denomination, length of attendance and your reason for leaving.

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<tr>
<th>Name of Church/ Denomination</th>
<th>Reason for Leaving</th>
<th>Were you a member? Yes or No</th>
<th>Length of Time you were there From:</th>
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Please give an approximation of when you got born again as well as a brief explanation of how you got saved.

Applicant: Salvation Date ___________________ Briefly state how you got saved?

Spouse: Salvation Date ___________________ Briefly state how you got saved?

If you died tonight where would you go? ___________________ Spouse: ___________________

If you died tonight and stood before God and He asked you, “Why should I let you into heaven?” What would you say?

Spouse:

Have all those in your family, who are seeking membership, received Christ? □ Yes □ No

If not, to your knowledge, who has not yet received Christ? _________________________________

Have you been baptised in water by immersion? □ Yes □ No Approx. Date ___________

Spouse? □ Yes □ No Approx. Date ___________

Children? □ Yes □ No Approx. Date ___________
Have you received the baptism in the Holy Spirit by faith, with the evidence of speaking in other tongues?

Applicant: ☐ Yes ☐ No Approx. Date__________
Spouse:    ☐ Yes ☐ No Approx. Date__________
Children: ☐ Yes ☐ No Approx. Date__________

Do you believe in the principle of the tithe and offering: are you willing to faithfully support the ministry of this church with your prayers, dedication, and finance as God enables and directs you?

☐ Yes ☐ No Spouse ☐ Yes ☐ No

Why do you feel that you want to enter into a “family” relationship with this church body?
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Spouse’s answer:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Do you share and embrace in the MLFC mission of “Sharing Christ. Maturing Believers. Changing the World”?

☐ Yes ☐ No Spouse ☐ Yes ☐ No

What gifts, talents, and abilities do you feel you are willing to contribute to this church?
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Spouse’s answer:
________________________________________________________________________________________
________________________________________________________________________________________

Class will be held on Saturday from 13:00 – 16:00 Hrs (Snacks will be on sale in the tuck-shop)

** Please take note that anyone who comes 10 minutes late will not be able to attend the class.

STOP AND REVIEW

*PLEASE READ THROUGH YOUR FORM TO ENSURE THAT YOU HAVE RESPONDED TO ALL THE QUESTIONS AS INCOMPLETE APPLICATION FORMS WILL NOT BE PROCESSED.