

*District of Columbia, Delaware and
Maryland District Council*

*22nd Episcopal District, Pentecostal Assemblies of the
World, Incorporated*

One Lord, One Faith, One Baptism. Ephesians 4:5

Application for Membership, Home Missionary Local Fellowship

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Name of Church Affiliation: _____

Pastor's Name: _____

Application for: Membership () Missionary () Local Fellowship ()

How long have you been a member of this church? _____

Are you willing to be governed by the *Constitution* and *by-laws* of the District of Columbia, Delaware and Maryland District Council? _____.

When and where did you receive the baptism of the Holy Ghost? _____

When and where were you baptized in the name of Jesus' name (according to Acts 2:38)? _____

Do you fully support the Apostolic Doctrine which includes living a life above sin? _____

Do you attend Church regularly? _____

Do you solemnly affirm that the above statements are true as to the best of your knowledge? _____

Applicant's Signature: _____



I do hereby solemnly affirm that the above statements by _____
are true to the best of my knowledge.

Pastor's Signature: _____

Note: *Each Pastor is responsible for the department of every applicant that he/she signs*