



Holy Tabernacle Church- Randolph

333 Center Street Randolph Ma. 02368 (781) 963-9264

Baptismal Form

Please Print

Name: _____ Date: _____

Address: _____

City: _____ St. _____ Zip Code: _____

D.O.B: _____ Place of Birth: _____

Mother's Name: _____ Father's Name: _____

Home: _____ Work: _____

Cell/Other: _____ Email: _____

Membership Date: / / Baptismal Date: / / Christening Date: / /

Please Circle Status: Single Married Widowed Divorced

Employer: _____

Address: _____

City: _____ St. _____ Zip Code: _____

Occupation: _____ Wrk. Hrs.: _____

Spiritual Gifts

Primary

Secondary

Pastoral Leadership: Bishop Curtis D. Nelson & Min. Dorothy Nelson



Holy Tabernacle Church of Randolph

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MEMBERSHIP QUESTIONNAIRE

Each adult should complete an application. **PLEASE PRINT**

GENERAL INFORMATION Date: _____

Name _____

Home Address _____

City _____ State _____ Zip _____ Home Phone _____

Mailing Address (if different) _____ City, State, Zip _____

E-mail Address _____ Cellular Phone _____

Occupation _____ Position _____

Place of employment _____ Work Phone _____ Fax # _____

IF STUDENT, NAME OF COLLEGE _____ **Date of graduation** _____

Birthdate _____ Date Saved _____ Gender _____

FAMILY

Marital Status: Single _____ Single Parent _____ Widowed _____ Married _____ Married/Separated _____

Divorced _____

Spouse's Name _____

Spouse's Employment _____ Work Phone _____

Does spouse attend Holy Tabernacle Church of Randolph? _____ Are they a member? _____

INTERESTS/TALENTS/GIFTS

What special interests, talents, gifts do you have? _____

CHURCH BACKGROUND/HISTORY

Have you been baptized in any Christian Church? . YES . NO Date (if known) _____

Please designate below how you wish to unite with Holy Tabernacle Church of Randolph:

_____ Profession of Faith (You are uniting with the Christian Church for the first time.)

_____ Reaffirmation of Faith (You have formerly been a member of a Christian Church; membership is no longer active.)

_____ Letter of Transfer (You are transferring from another Christian Church.)

Year you became a Christian _____ In what denomination? _____

Church last attended: _____ Denomination _____

City, State, Zip _____ Pastor _____

Areas of service or ministry _____

Did you leave on good terms with the pastors, leaders and church? (yes/no) If no, please explain:

How did you learn about Holy Tabernacle Church? _____

Have you had any Bible/theological training, or special equipping for ministry? (yes / no) If yes, please explain: _____

Have you attended the "New Members Classes" Yes/No

Pastoral Leadership: Bishop Curtis D. Nelson & Min. Dorothy Nelson

Membership Questionnaire Continued

PLEASE PRINT

CHILDREN - (list children 18 and under who will be participating regularly in church activities)

Full Name	Gender	Grade	School	D.O.B	Age