

House of Destiny Church

Standards for Membership

Any person interested in becoming a member of this congregation shall complete the membership orientation class (this class will be conducted twice a year or as the need arises) and upon completion each applicant submit a written and signed application, on a form approved by Board of Trustees, to the secretary of this Church. Each application shall be considered by the Board of Trustees at its regular meetings or at any special meeting of the Board of Trustees and approved, disapproved or tabled. Applicants whose applications have been approved shall be considered active members of the congregation of this Church.

Any applicant shall give evidence of their new birth in Christ, live a consistent Christian life and worship at this Church on a regular basis for at least three (3) month continuous period, supporting this Church financially and subscribe to the Tenants of Faith as defined by these Constitution & By-Laws.



House of Destiny Church Membership Application 45 Charlton Street, Southbridge, MA 01550

casadedestino2011@gmail.com

* Do you grant permission for the I events, activities and meetings con by our marketing team?	taining your in	nage for advertisin	
* Would you like for your informat	ion to be in out	-	ctory?
First & Last Name:			_ Date of Birth://
Home Phone: ()	Cel	l Phone: () _	
Address:		City:	
E-Mail:			
Occupation:			
Marital Status: □ Single □ Married □	Divorced □ V	Vidowed	
Children Name(s)	Boy/Girl		Birthdate (mm/dd/yy)
CHURCH BACKGROUND/HISTORY			
Year you became a Christian	In what	denomination?	
Church last attended:			
City, State, Zip		Pastor _	
Have you been water baptized (date))?	if not, do	o you wish to be? Yes No
Have you had any Bible/theological t	raining, or sp	pecial equipping	for ministry? □ Yes □ if yes,
please explain:			

Have you been a member of a previou	us church? ☐ Yes ☐ No And if so did you leave on good		
terms with the pastors, leaders and ch	nurch? Yes No If no, please explain:		
How did you learn about House of Des	stiny?		
What way(s) do you desire to serve w	ithin our church family (based on your interests, abilities,		
gifts, and time)?			
Have you attended the "New Membe	rs Orientation" Class?		
☐ Yes ☐ No ☐ I am willing to participa	ate in this class in the future.		
Note: Although this class is not a requirement fo	r membership, participation in this class will be very beneficial to your		
spiritual health and your participation within our	r church family.		
word and spirit. As a member of this	t of Faith and am in full agreement with them in both church, I will abide by these documents, and seek to s to the best of my ability, and will endeavor to fulfill o His work.		
Signature	Date		
******PASTORAL	OFFICE ONLY*************************		
Date Reviewed:/	By Whom:		
Comments:			
Date Accepted:/	Pastoral Signature:		
Membership #:	Date of Official Reception:/		