

Kampong Kapor Methodist Church

Please affix recent passport size photograph

ADULT BAPTISM / MEMBERSHIP FORM

(16 years old & above)

APPLICATION FOR:	(to be completed at the 1 st session)			
BAPTISM By Immersion By Sprinkling	MEMBERSHIP Confirmation of Membership (for those baptised at age 15 years & b Profession of Faith (for those baptised at age 16 years & a	From Other Denominations		
PERSONAL PARTICU	LARS: (Please complete in BLOCK LETTERS)			
	/ Mrs / Ms / Mdm Name as in NRIC:			
NRIC/Passport No Nationality: Race: Preferred Name to be printed on Certificate:				
Date of Birth:	Marital Status:	Date of Marriage:		
Address:				
Telephone:	(H)	(O)(M)		
Email:	Occupatio	on:		

FAMILY BACKGROUND:					
Relationship	Name	Age	Religion	<u>Church</u>	Occupation
Spouse					
Children					

Relationship	Name	Age	Worshipping at KKMC?	<u>Remarks</u>
Father			* Yes / No	
Mother			* Yes / No	
Siblings			* Yes / No	
			* Yes / No	
			* Yes / No	
			* Yes / No	
			* Yes / No	

Confidential

Grandparents /Relative	* Yes / No	
	* Yes / No	
	* Yes / No	
	* Yes / No	

OTHERS:

- 1. Have you been baptised? * Yes / No
 - a. If yes, baptised as a * child / adult?
 - b. Date of Baptism: ______ Name of Church: _____

2. How long have you been worshipping at Kampong Kapor Methodist Church ('KKMC')?

- 3. Which Worship Service are you currently attending? (Please circle below)
 - English 8 am/ 10 am
 - Peranakan 11 am

- Mandarin 2 pm
- Tamil 5.30 pm
- Online: 10am (Eng)/ 2pm (Man)/ 5.30pm (Tam)

4. How did you come to know of KKMC?

- 5. Are you involved in any committee, organisation &/or LIFEGroup at KKMC? * Yes / No
 - a. If **yes**, please specify _____
 - b. How long have you been with them? ______
 - c. LIFE Group's name ____
- 6. Are you transferring your membership from another Church? * Yes / No
 - a. If yes, Name of church you are transferring from ____

DECLARATION:

I confirm that the above information given are true and correct to the best of my knowledge.

I understand and acknowledge that Kampong Kapor Methodist Church ('KKMC') is collecting my personal data in this application form in relation to my baptism, and/or membership in KKMC. I hereby give consent to KKMC collecting, using or disclosing my personal data for all related purposes of maintaining, updating and otherwise in administering the Church's records (including prayers, tithes, offerings and services), that may arise out of or in connection with my baptism and/or membership in KKMC.

I also consent to KKMC contacting me by telephone, or sending phone or email messages to me arising out of or in connection to my Baptism/Membership in KKMC.

Signature:

Date:	
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Confidential

Applicant to note:

- *1)* **Delete where applicable*
- 2) Document check list to be submitted with the completed form:
 - a. A copy of NRIC for verification purposes.
 - b. A recent Passport size photo.
 - c. A Letter of membership transfer (from other denomination).
 - d. Baptism Cert infant or adult.
 - e. Membership Cert (If applicable)

For OFFICIAL USE:	Document Checklist
Date of Baptism / Membership Class:	Photograph
Date of Interview: Interviewed by:	Letter of
Date of Baptism: Certificate No	Membership Transfer
Baptised by:	Photocopy of:
Date of Confirmation: Certificate No	
	Baptism Cert
Confirmed by:	Membership Cert
Date of Transfer: From (Church):	