



Membership Application Form

Please complete the Membership Application Form and return it to one of the leaders.

PERSONAL DETAILS

NAME (if more than one family member is applying, please submit all names to be considered. Children under 18 are considered to be covered under their parents' membership and their names need not be included here):

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CONTACT NUMBER:

E MAIL ADDRESS:

POSTAL ADDRESS:

PHYSICAL ADDRESS:

I/we confirm that I have read and understood the NCF Membership Information Sheet.

I/WE DECLARE THAT:

- I/we agree with the NCF Statement of Belief, as well as the Nicene and Apostles Creeds
- I/we agree to make an effort to attend NCF Sunday services as regularly as is practical
- I/we agree to enter into the life and spirit of the fellowship as a 'family' as much as is reasonably possible
- I/we agree to come under the authority of the NCF Leadership
- I/we do not currently hold membership in other local Church, and will not take up membership in another local church whilst holding membership in NCF.

SIGNATURE OF APPLICANT/S (All applicants to sign)

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DATE