

Crossroads Church of God

6213 Miller Lane • Dayton, Ohio 45414 • (937) 890-0080

Please print and complete the Application for Fresh Start Class.

Mr. Mrs. Ms. Sex: Male Female Marital Status: Single Married Divorced Widowed

Last Name: _____ First Name: _____ MI: _____

Nickname: _____ Birth Date: Month _____ Day _____ Year _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: Home: _____ Cell: _____ Work: _____

Your Personal E-mail Address: _____

Occupation: _____

Spouse Name if married: _____ Is spouse a member? Yes No

Do you have a child/children that live with you? Yes No

Did you attend a church previously? Yes No If yes, name of church: _____

Did you hold any position (s) in that church? Yes No If yes, what position (s): _____

The church location (city and state): _____

Before coming to Crossroads Church of God, were you a Born-again Christian? Yes No Not Sure

If No or Not Sure, are you now a born-again Christian? Yes No Not Sure

When did you become a Born-again Christian? New Birth Date: Month _____ Day _____ Year _____

What scriptures do you base your experience of the new birth in Christ? _____

Please write out your personal testimony of how you came to Christ on the back of this application. _____→

Before coming to Crossroads Church of God, were you baptized in water fully immersed? Yes No

If no, Do you want to be baptized? Yes No If yes, please fill out the Application for Water Baptism.

If you have become a Born-again Christian with in the last six (6) months, the Fresh Start Class is a required class for all new converts. Please fill out the Application for Fresh Start Class, and return this application (Membership Application Form) and the Application for Fresh Start Class to the church office. The church office will schedule you for the next opening in the Fresh Start Class.

Your Signature: _____ Date: _____

Applicant's Name: _____
APPLICATION FOR FRESH START CLASS

