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PERSONAL PARTICULARS

(Applicants must be at least 13 years of age) Application for **Water Baptism** Full Name: Christian name (if any): Sex: M/F Date of birth: I.C. number: TESTIMONY Address: Write a short testimony of what Christ has done in your life. Postcode: Tel. (H) (O) (H/P) Date of Salvation: Place of Salvation: DATE: **Signature Of Applicant** QUESTIONNAIRE 1. Do you accept that all of us have sinned, resulting in separation from God, and that faith in Jesus Christ, is the only way to salvation and reconciliation with God? (Rom 3:23, Rom 5:8, John 14:6) Yes No 2. Do you believe that your salvation is by the grace of God and not because of works and that you have received it by faith. (Eph 2:4-5, Eph 8-9) Yes 3. Have you confessed and asked for forgiveness for your sins and accepted Jesus Christ as your Lord and Saviour? (John 3:16-18, 1 John 1:9) No 4. Have you completed the Water Baptism course? Yes No Date of completion: ONLY FOR APPLICANTS UNDER THE AGE OF EIGHTEEN YEARS Have you informed your parents that you are making this application Why do you want to follow the Lord Jesus Christ in water baptism? to be baptised in water? Yes Signature of Father/Mother/Guardian Recommended by SG Leader: Signature FOR OFFICE USE ONLY Recommended by ZP: Endorsed by RP: Remarks: **Date of Received:**