



CHINESE CHRISTIAN CHURCH
雪梨華人基督教會

100 Alfred Street, Milsons Point, NSW 2061 Tel: 9955 2800
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會員申請表
MEMBERSHIP APPLICATION FORM

中文姓名 / 英文姓名 NAME IN CHINESE AND ENGLISH	性別 SEX <input type="checkbox"/> 男 (M) <input type="checkbox"/> 女 (F)	日期 DATE OF APPLICATION
出生日期 / 出生地點 DATE AND 地點 PLACE OF BIRTH ____日(d)____月(m)____年(y)	受洗日期 DATE OF BAPTISM ____日(d)____月(m)____年(y)	地點 PLACE OF BAPTISM / CONFIRMATION *
通訊地址 CONTACT ADDRESS	住家電話 HOME PHONE	堂會 CONGREGATION
電郵地址 EMAIL ADDRESS	手提電話 MOBILE PHONE	職業 OCCUPATION
會員申請 本人欲申請加入雪梨華人基督教會為會友。本人於此為證，已接納主耶穌基督為個人救主，並立志依賴聖靈能力要過聖潔生活，討神喜悅。 本人願意接納雪梨華人基督教會章程所包含的宗旨和信仰。 本人訂約以本會會員資格持守神的話，按照聖經守訓，經常聚會禱告，並參與聖工，樂意奉獻以支持會務並助長教會內基督徒團契合一之精神。	MEMBERSHIP APPLICATION I wish to apply for membership in the Chinese Christian Church, Sydney. I confess that I have accepted Jesus Christ of the Holy Spirit, to live a life holy and pleasing to God. I agree with the objectives, aims and doctrines of this church, as contained in the Church Constitution. I covenant as a member of this Church, to accept biblical instruction and to be faithful to the Word of God. I will uphold the church's unity and support her ministries and worship services through regular participation, prayer, service and cheerful giving.	
舉薦人姓名 NOMINATOR'S NAME (please print) 1) _____ 2) _____	申請人簽名 / 日期 APPLICANT'S SIGNATURE / DATE ____日(d)____月(m)____年(y)	
會牧意見 PASTOR'S REMARKS (必須 Mandatory)	執事會意見 DIACONATE'S REMARKS (必須 Mandatory)	
<<<<<< 此欄專供教會使用 OFFICE USE ONLY >>>>>>		
批准日期 DATE OF APPROVAL: ____日(d)____月(m)____年(y)		
會員編號 MBR NO: _____		

* If baptised as an infant, then the confirmation date is required for membership application.* Form v20180706