



STEP UP

APPLICATION FORM FOR ADULT BAPTISM and/or MEMBERSHIP
(Applicable for candidates 16 years of age and above only)

Prerequisites for Baptism:

1. Attend ALL 6 sessions of *Step Up* (the Baptism & Membership Class).

Prerequisites for Membership:

1. Attending TPMC Services for at least 6 months.
2. Regular and integrated in a Connect Group for at least 1 year OR serving in a Ministry for at least 1 year.
3. Receive recommendation and support for membership from your Connect Group/ Ministry Leader and/or an interview with a pastor.
4. Attend ALL 6 sessions of *Step Up* (the Baptism & Membership Class).

Documents to Submit for Baptism and/or Membership:

1. Submit a copy of your NRIC/FIN/Passport.
2. Submit a copy of your Baptism Certificate. (*If you have been baptised previously.*)
3. Submit a letter from your current church/pastor, recommending membership transfer.
4. Submit a testimony of about 150 words. (*Note: This may be used in various church media.*)

Important Note:

1. TPMC reserves the right to postpone or disallow an application if the relevant prerequisites are not fulfilled.
2. Letters to Methodist Schools will be issued to members only, without exception.
3. The reason for membership application should be about wanting to be part of a local church, to anchor yourself for the long-term to serve, give and love the local church community, as well as reach out to the harvest fields God has called for TPMC. It is therefore important to be part of the body-life of the church before considering membership.
4. Candidates who have completed Step Up and undergone baptism should aim to become members of TPMC within 3 years from the date of baptism. After which, they may be required to undergo the Step Up course again.

A. PERSONAL PARTICULARS

Salutation: (Mr / Ms / Mdm/ Dr / others: _____)

Name as in NRIC: _____

NRIC No: _____ Date of Birth: _____
(dd/mm/yyyy)

Nationality: _____ Sex: _____ Race: _____

Marital Status: _____ Occupation: _____

Email: _____

Contact: (Home) _____ (Mobile) _____

Address: _____

Postal Code: S()

Attach passport photo
here
(45mmx35mm)**B. BAPTISM & MEMBERSHIP TRACK** I am applying for *Baptism only. I am applying for Membership only. I am applying for *Baptism & Membership. I am applying for a Transfer of
Membership.

*Mode of Baptism

 Immersion Sprinkling**C. FAITH JOURNEY**

1. I accepted Jesus as my Lord and Saviour on _____ (dd/mm/yyyy, if possible).

2. I was baptised in _____ (name of church).

3. I would like to transfer my membership from _____ to
Toa Payoh Methodist Church. (name of church)**D. RELATIONSHIP WITH TPMC**

1. I started attending TPMC services on _____ (dd/mm/yyyy, if possible).

2. The service which I attend most regularly is (please choose only one)

 8.30am Service 10.30am Service Youth Service Filipino Service3. The Connect Group that I am currently attending is _____
(you may name the Connect Group Leader.)

4. I am serving in _____ (name of ministry)

5. For contact & records purposes, please name immediate family members:

Name (in full, if possible)	Relationship	Date of Birth	Contact No.

I have read, understood and accept the requirements and pre-requisite for baptism and/or membership in TPMC. I declare that all information given by me is true and correct to the best of my knowledge, and that I have withheld nothing which would affect my application.

Signature of Applicant & Date

TOA PAYOH METHODIST CHURCH is committed to safeguarding your personal information. In submitting this form, you agree and consent to the use of information and contact details you have provided for purpose of activities, programmes and services of the church. For any correction, withdrawal or limitation of consent, please write with full particulars to dataprotection@tpmc.org.sg.

FOR OFFICE USE

PREREQUISITES		CLASSES	Date Attended	Date of Baptism	Baptised By
NRIC/FIN/Passport	<input type="checkbox"/>	Session 1		_____	_____
Testimony	<input type="checkbox"/>	Session 2		Baptism Certificate No.	
Baptism Cert	<input type="checkbox"/>	Session 3		_____	
Transfer Letter	<input type="checkbox"/>	Session 4		Date of Mbship	Confd by
Regular member of a Connect Group or serving in Ministry in TPMC	<input type="checkbox"/> CGL/ Ministry Leader _____ Date verified: _____	Session 5		_____	
		Session 6		Membership Certificate No.	

MY TESTIMONY

All TPMC baptism and membership candidates (including transfers from other churches) are requested to submit a testimony so that in sharing about your Christian walk, the larger TPMC body may get to know you better and embrace you into our fellowship. Your testimony may be projected during the baptism service or used in our in-house publication.

(PLEASE ANSWER ALL THREE QUESTIONS.)

Why and how did you become a Christian? (50 words)

How has being a Christian made a difference in your life? (50 words)

How are you building your relationship with Christ daily? (50 words)



CONNECT GROUP/ MINISTRY LEADER'S SPONSORSHIP FORM
(For Membership Application)

Instructions for Connect Group or Ministry Leader

1. Your CG/Ministry member has registered for the *Step Up* class to apply for membership to TPMC.
2. Candidates will be received into membership based on the following requirements, together with your sponsorship.
 - a. The reason for your CG member's application should be about wanting to be part of a local church, to anchor him/herself for the long-term to serve, give to and love the local church community, as well as reach out to the harvest fields God has called for TPMC.
 - b. Baptised believer.
 - c. Integrated and regular member of your Connect Group or serving in the Ministry for at least 1 year.
 - d. Supported by his/her Connect Group or Ministry Leader.
3. Please complete and return this form directly to agnes@tpmc.org.sg, the Pastoral Staff for Connect Groups, and cc. cynthia.poon@tpmc.org.sg
4. For any clarification, please email agnes@tpmc.org.sg
5. Thank you for your partnership in ministry. God bless.

Connect Group/ Ministry Leader's Confirmation of Support for Membership

I, _____ (name of Connect Group/ Ministry Leader) from

_____ (Connect Group Name or Ministry Name)

RECOMMEND/ DO NOT RECOMMEND* (* Delete accordingly)

_____ (name of candidate as in Membership registration

form) to be received as a member of Toa Payoh Methodist Church. (*Delete accordingly)

Signature and Date