



STRICTLY CONFIDENTIAL
FAIRFIELD METHODIST CHURCH
BAPTISM & MEMBERSHIP FORM
 卫理公会 花菲教堂—洗礼和会员表格

PHOTO

Please tick (✓) whichever applicable 请在合适的空格打勾(✓)

- | | |
|--|---|
| <input type="checkbox"/> BAPTISM 洗礼 | <input type="checkbox"/> CONFIRMATION 坚信礼 |
| <input type="checkbox"/> BAPTISM & MEMBERSHIP
洗礼并成为会员 | <input type="checkbox"/> TRANSFER OF MEMBERSHIP
转会会员 |

PERSONAL PARTICULARS 个人资料		
NAME (AS IN NRIC) (英)	Dr/Mr/Mrs/Ms/Mdm 博士/医生/先生/太太/小姐/女士	NRIC/PASSPORT NO 身份证/护照号码
CHINESE CHARACTER (中)		
RESIDENTIAL ADDRESS 住家地址		
SINGAPORE 邮区		
EMAIL 电邮地址		
TELEPHONE NO (HOME) 电话(家)	TELEPHONE NO (OFFICE) 电话(办公室)	MOBILE PHONE 手机
DATE OF BIRTH 出生日期	PLACE OF BIRTH 出身地	RACE 种族
DIALECT 方言	NATIONALITY 国籍	OCCUPATION 职业
MARITAL STATUS 婚姻状况	NAME OF SPOUSE 配偶姓名	
MARRIAGE SOLEMNISED / BLESSED ON 证婚礼/ 祝婚礼日期	CHURCH/R.O.M. 教会/结婚注册局	OFFICIATING MINISTER 主礼牧师
HIGHEST STANDARD PASSED 最高学历	WHO BROUGHT YOU TO FAIRFIELD? 谁带你来花菲堂	WHEN VISITED? 几时来的?
WHICH CELL ARE YOU CURRENTLY ATTENDING? 近来参加哪小组?		

OFFICIAL INFORMATION (FOR OFFICE USE ONLY) 教会资料(教会填写)		
DATE OF BAPTISM 洗礼日期	PLACE OF BAPTISM 洗礼地点	OFFICIATING MINISTER 主礼牧师
DATE OF CONFIRMATION 坚信礼日期	RECEIVED BY (PASTOR) 主礼牧师	SPONSOR'S NAME 监护人
DATE OF TRANSFER 转会日期	TRANSFERRED FROM 原属教会	SPONSOR'S NAME 监护人
REMARKS 备注		

FAMILY INFORMATION 家庭成员资料				
FATHER'S NAME 父亲姓名		FATHER'S RELIGION 父亲所属宗教		REMARKS 备注
MOTHER'S NAME 母亲姓名		MOTHER'S RELIGION 母亲所属宗教		REMARKS 备注
SIBLINGS' NAME 兄弟姐妹姓名	RELATIONSHIP 关系	RELIGION 宗教	REMARKS 备注	
CHILDREN'S NAME 孩子姓名	SEX 性别	BC/IC NO 出生/身份证	BAPTISED ON 受洗日期	REMARKS 备注
	M/F			
	M/F			
	M/F			
	M/F			

PERSONAL DECLARATION OF FAITH 宣告信仰

我_____ 诚心悔改认罪，并接受耶稣基督为我个人的救主，愿尽心遵守上帝的带领和教导，一生遵行主的道理。

我已经/愿意奉圣父、圣子和圣灵的名受洗。誓要在主的圣教会中作一忠诚的会友，经常参加聚会，勤学圣经，一祈祷，奉献和事奉支持卫理公会。

愿神的恩典和圣灵的大能帮助我谨守以上宣信。

(PLEASE NOTE)

I also acknowledge that Fairfield Methodist Church is collecting and using my personal data in this form for membership records, member care, and administration and communication purposes. I hereby consent to Fairfield Methodist Church collecting, using or disclosing my personal data for the purpose of contacting me via telephone/sending phone messages/email/mails relating to the above stated purposes.

(请注意)

我也认同卫理公会花菲教堂在收集我个人的资料，是使用在会员记录、会员关怀、行政和沟通的目的。我在此同意卫理公会花菲教堂在收集和使用我个人的资料，以通过电话、发送手机短信、电子邮件或邮件来与我联系，以达到以上的目的。

日期 Date

签名 Signature