

**INDIVIDUAL
Application for Fellowship in F.B.F.A.**

I _____, of _____
Name City and State

after prayerful consideration, have decided to apply for fellowship in the Fundamental Baptist Fellowship Association (F.B.F.A.).

Date _____, 20____ .

Name of Church Affiliation _____

Church Address _____

City , State and Zip _____

Church Phone No. _____ Pastor's Name _____

Your Home Address _____

City , State and Zip _____

Home Phone No. _____

Who Referred you to F.B.F.A. _____

Briefly state your reason(s) for applying for fellowship in the F.B.F.A.

List three (3) Character References:

	<u>Name</u>	<u>Address</u>	<u>Phone Number</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Please indicate your compliance with statements below by checking appropriate boxes.

- [] I am applying for individual associate membership.
[] I have read the Doctrinal Statement of the F.B.F.A. and I am in agreement with your Biblical stand upon God's Word.
[] I have read the Constitution and By-laws of the F.B.F.A. and I pledge to abide by and uphold these principles of the Association.

Signature of Applicant

Please return completed Application to:
Vice President of Administration; Fundamental Baptist Fellowship Association
7203 The Paseo Blvd, Kansas City, Missouri 64132