

CHURCH OF THE BELOVED ECUMENICAL CATHOLIC COMMUNITY
COMMUNITY MEMBERSHIP

Name: _____

SO Name: _____

Address: _____

City: _____ Colorado, Zip Code: _____

Home Phone: _____

Mobile Phone: _____ SO Mobile Phone: _____

Email: _____ SO Email: _____

Birthdate: _____ SO Birthdate: _____

Relationship Status: Single Partnered Married Divorced Widowed

Anniversary Date: _____

Occupation: _____ SO Occupation: _____

I (We) are interested in receiving the following Sacraments of the Church:

- | | | | |
|----------------|--------------------------|----|--------------------------|
| Baptism | <input type="checkbox"/> | SO | <input type="checkbox"/> |
| Communion | <input type="checkbox"/> | SO | <input type="checkbox"/> |
| Reconciliation | <input type="checkbox"/> | SO | <input type="checkbox"/> |
| Confirmation | <input type="checkbox"/> | SO | <input type="checkbox"/> |
| Marriage/Union | <input type="checkbox"/> | | |
| Holy Orders | <input type="checkbox"/> | SO | <input type="checkbox"/> |
| Anointing | <input type="checkbox"/> | SO | <input type="checkbox"/> |

Children/Elders in Our Household:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

I (We) are interested in parish religious formation for our children: Yes. No.

Our Religious Background is:

- | | | | | | | | |
|--------------------------|--------------------------|----|--------------------------|----------------|--------------------------|----|--------------------------|
| Old/Independent Catholic | <input type="checkbox"/> | SO | <input type="checkbox"/> | Roman Catholic | <input type="checkbox"/> | SO | <input type="checkbox"/> |
| Orthodox | <input type="checkbox"/> | SO | <input type="checkbox"/> | Protestant | <input type="checkbox"/> | SO | <input type="checkbox"/> |
| Evangelical Christian | <input type="checkbox"/> | SO | <input type="checkbox"/> | Jewish | <input type="checkbox"/> | SO | <input type="checkbox"/> |
| Islam | <input type="checkbox"/> | SO | <input type="checkbox"/> | Hindu | <input type="checkbox"/> | SO | <input type="checkbox"/> |
| Other | _____ | | | | | | |

I (We) would like:

- A meeting with one of the priests.
- A house blessing.
- Our contact information included in the Parish Directory.

COMMUNITY COVENANT

Having acknowledged my baptismal call to follow Christ in Christian community and in the service of my sisters and brothers, and being in agreement with the statements, strategy, and structure of Church of the Beloved Ecumenical Catholic Community, I now feel led by God's Spirit to unite with this community of faith. In doing so, I wholeheartedly commit myself to God and to the other members of Church of the Beloved to do the following:

1. I will protect the unity of my church:
 - By acting in love toward other members.
 - By refusing to gossip.
 - By respecting the diversity of life and opinion of other members.
2. I will share the responsibility for my church:
 - By praying for its growth.
 - By inviting others to attend, particularly those seeking a community of faith.
 - By warmly welcoming those who visit my church.
3. I will serve the ministry of my church:
 - By discovering my gifts and talents.
 - By developing a servant's heart, particularly for those most in need.
 - By working together for the mission and ministry of my church.
4. I will support the life of my church:
 - By celebrating worship faithfully.
 - By living a Gospel-oriented life.
 - By giving proportionally, consistently and generously in stewardship of my time, talents and financial resources.

In faith, I (We) hereby sign this Membership Covenant with the faith community of Church of the Beloved Ecumenical Catholic Community of Northglenn, Colorado.

Signature _____ Date _____

SO Signature _____ Date _____

In faith and on behalf of Holy Spirit Ecumenical Catholic Church, I joyfully accept this covenant and confirm the above person(s) as one with our community with full rights and responsibilities.

Pastor _____ Date _____