



LIVING FAITH WORLD MINISTRIES, INC.

Apostle Dr. Tony Barhoo & First Lady Dr. Sharlene Barhoo

950 Derbyshire Road • Daytona Beach, FL 32117

P.O. Box 10861 • Daytona Beach, FL 32120-0861

Membership Form

Date _____

Name _____ Birthday _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Work _____ Cell Phone _____

How did you hear about our ministry? _____

Who invited you to Living Faith Email _____

Spouse Name _____ Birthday _____

Anniversary Date If Married _____ How many children? _____ Age(s) _____

Child's Name _____ D.O.B _____ Child's Name _____ D.O.B _____

Child's Name _____ D.O.B _____ Child's Name _____ D.O.B _____

In case of an emergency who do we contact? _____

Relationship _____ Phone number _____

What are you looking for in a church? _____

Would you like to meet with the Pastor? Yes _____ No _____ Best Time/Day _____

Please list areas of ministry you are interested in (choir, teacher, usher, hospitality, cleaning, Other, etc.) _____

List any needs or special prayer request _____

Please Check:

Do you know Jesus Christ as your personal Savior? Yes _____ No _____ Date _____

Do you have the baptism of the Holy Ghost? Yes _____ No _____ Date _____

Have you been Water Baptize? Yes _____ No _____ Date _____

Do you pay tithes? Yes _____ No _____ Are you Single? _____ Widow? _____ Divorce? _____ Married? _____

Do you have a bible? Yes _____ No _____ and are you involved in daily prayer/bible reading? Yes _____ No _____

Are you employed? Yes _____ No _____ Full Time _____ Part Time _____

Are you willing to use your gifts or talents for God? Yes _____ No _____

How can you be a blessing to this Ministry? _____

What are you looking for in a church? _____

Signature _____ Date _____