## **Decision Form**

Spiritual Gifts\_

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Decision Date _	/	_/	П

Cross Church Campus OR other event (please specify): Service Time: □ Growth Track □ Other\_\_\_ □ Springdale □ Pinnacle Hills □ Fayetteville □ HWY 62 Please answer the following question: In your personal opinion, what do you understand it takes for a person to go to heaven? A. INDIVIDUAL INFORMATION One person per form. Do not combine couples or families. Check ALL that apply: □ Child □ Single □ Divorced □ Married □ Widowed DOB\_\_\_\_/\_\_\_/ □ Mr. □ Mrs. Miss ☐ Ms. ☐ Dr. ☐ Rev. Goes by\_\_\_\_\_ ☐ Male ☐ Female Name \_\_\_\_\_\_ Wedding Anniversary\_\_\_\_\_/\_\_\_\_/\_\_\_\_ If married, spouse's name\_\_\_\_ Children's names/DOB who are NOT joining Cross Church but are part of your household\_\_\_\_\_ Street Address\_\_\_\_ \_\_\_\_\_ State\_\_\_\_ \_\_\_\_\_Zip\_\_\_\_ \_\_\_\_\_Email\_\_\_ Do you regularly attend church? \( \subseteq \text{ Yes} \) No If Yes, where?\_\_\_\_ For minors 18 years & younger: Grade\_\_\_\_\_ Parent's Name\_\_\_ School\_ Counselor's Name **B. DECISIONS** To Be Filled Out By Decision Counselor 1. □ PROFESSION OF FAITH 3. □ TRANSFER OF LETTER 2. 

STATEMENT OF FAITH Has been baptized in a church of like faith and Name and Address of Southern Baptist Church: ☐ Desiring Membership by Baptism practice by immersion after being saved. ☐ Desiring Non-Member Baptism Name (or denomination) of church where City\_\_\_\_ baptism took place: State\_\_\_ REQUESTED BAPTISM DATE \_\_\_\_/\_\_\_ REQUESTED MINISTER\_ □ BAPTISM PERFORMED Baptism Date \_\_\_\_/\_\_\_\_ Baptizing Minister's Signature\_\_\_\_\_ **OTHER DECISION:** 

Surrender to Ministry 

Rededication For Office Use Only C. MEMBERSHIP REQUIREMENTS **□** MEMBERSHIP COVENANT Growth Track Champion's Signature\_\_\_\_\_ Date \_\_\_\_/\_\_\_ □ GROWTH TRACK COMPLETE