



West Chazy Holiness Campmeeting Association, Inc.
Application for Membership

I testify that I believe in the one living and true God; who is Father, Son, and Holy Spirit. The Savior of all who put their faith in Him alone for eternal life. His only begotten Son, Jesus Christ; crucified, risen, and coming again, who is my Lord and Savior.

We believe that those who are made new in Christ are called to be Holy in character and conduct in private and public.

Applicant's Name:		Date:
Address:	City/State/Zip:	
Phone: ()	Email:	

Please answer the following questions:

- Do you profess a faith in the Lord Jesus Christ? Yes NO
- Are you actively attending an Evangelical, Holiness, Bible-believing Church?
Yes No
- Are you actively volunteering in your church?
Yes No
- Is it your intent to attend and support the WCHCA programs?
Yes No
- Which WCHCA programs are you attending?
Family Camp Married Couples' Retreat Men's Retreat Ladies' Retreat
- Which WCHCA programs do you plan to attend in the future?
Family Camp Married Couples' Retreat Men's Retreat Ladies' Retreat

Please attach:

- Your written testimony; with short explanation for your request for membership
- Your Pastor's written reference
- A written Personal Reference (not a family member)
- A written Personal Reference from a current WCHCA member
- \$25 membership fee. Non refundable

Please submit application to:

Sharon Wells
101 Henry Rd
Madrid, NY 13660
Updated 9/20

<u>For Office Use Only</u>	
Date Received	/ /
Action:	Date: /