

# CGCN INDIVIDUAL MEMBERSHIP APPLICATION

## PERSONAL INFORMATION

|                              |        |           |
|------------------------------|--------|-----------|
| Name:                        |        |           |
| Title:                       | Phone: | Phone2:   |
| Email:                       |        |           |
| Blog/Podcast/radio show/etc: |        |           |
| Books you've authored:       |        |           |
| Preferred mailing address:   |        |           |
| City:                        | State: | ZIP Code: |

## PROFESSIONAL INFORMATION

|  |         |           |
|--|---------|-----------|
| Your current position:                                 |         |           |
| Current employer:                                      |         |           |
| Business address (if different from preferred address) |         | How long? |
| Phone:   | E-mail: | Fax:      |
| City:  | State:  | ZIP Code: |
| Previous ministry positions:                           |         |           |

## DENOMINATION/CHURCH/ORGANIZATION

|                             |  |  |
|-----------------------------|--|--|
| Denominational affiliation: |  |  |
| Your role(s):               |  |  |
| Church name:                |  |  |
| Your role(s):               |  |  |
| Organization(s):            |  |  |
| Your role(s):               |  |  |

## PREFERRED CGCN WORKING GROUP (INDICATE YOUR 1ST AND 2ND CHOICE)

Church Planting/Missions  Engaging Culture/Apologetics  Denominational Witness  Social Witness  Theology

## SIGNATURE

I acknowledge that I affirm the Common Ground Christian Network mission and purpose statement and that I affirm every tenet of the Christian faith expressed in the "Jesus Christ: Our Common Ground and Common Cause" document.

|   |       |
|---|-------|
| Signature of applicant:   | Date: |
| Suggested annual contribution to CGCN for individual members: \$100 |       |