

## BASIS OF FAITH

### Applicants for membership must:-

- [a] Believe in one God, Father, Son and Holy Spirit
- [b] Have accepted Yeshua the Messiah as their personal Saviour, and him alone
- [c] Believe in the Atonement which he wrought at Calvary
- [d] Believe in his Deity and Resurrection
- [e] Have made public confession of their faith; this shall involve baptism except in the case of members of good standing of the Society of Friends and of the Salvation Army
- [f] Declare their adherence to the Scriptures of the Old and New Testaments as the supreme rule of faith and life.
- [g] Seek to lead a life to the glory of God

## MEMBERSHIP FEES

Single Persons £10.00

Couples £15.00

Senior Citizens & Students

Single Persons £4.50

Couples £5.00

Please send the completed application form to:

The Secretary  
The British Messianic Jewish Alliance  
PO Box 607  
Harrow  
Middx HA2 9TF

Tel/Fax: 020 8864 4400

E-mail: [office@bmja.net](mailto:office@bmja.net)

Website: [www.BMJA.net](http://www.BMJA.net)

Registered charity number 1088805



## Membership

of the

# British Messianic Jewish Alliance

We welcome applications for membership and associate membership. We hope that this will lead to enriching fellowship and not be a mere formality.

Full membership is limited to those of Jewish descent, whilst associate membership is open to all who wish to support and be involved in the Alliance.

**DECLARATION:**

I have read the Constitution of the British Messianic Jewish Alliance. I understand the conditions of membership, and I submit my application to join.

Please write legibly in black. Delete appropriately:

FULL MEMBERSHIP / ASSOCIATE MEMBERSHIP

SURNAME: \_\_\_\_\_

FIRST NAMES: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

POSTCODE: \_\_\_\_\_

TEL NO: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

\*\*I was baptised at: \_\_\_\_\_

in [year]: \_\_\_\_\_

and again after: \_\_\_\_\_

I am now a member of: [please give address of church or fellowship]

\_\_\_\_\_  
\_\_\_\_\_

PLEASE INDICATE APPROPRIATELY

My father is Jewish – YES / NO

My mother is Jewish – YES / NO

Grandparent? \_\_\_\_\_

Other if Jewish background unsure: \_\_\_\_\_

Please give the name and address of a member of the Alliance to whom you are known and / or the name and address of the Minister of your church, or the Leader of your fellowship to whom reference may be made:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

YOUR STORY: Either in the space below or on one side of A4 only, please give brief biographical details and say how you came to accept Jesus as Messiah of Israel and your personal Saviour

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\_\_\_\_\_  
\_\_\_\_\_

SIGNED \_\_\_\_\_

DATE \_\_\_\_\_

\*\* See clause [e] overleaf