



NEW MEMBER GUIDE, POLICY, APPLICATION AND MEMBERSHIP COVENANT (African Methodist Episcopal Church – Local Church Template)

I. PURPOSE AND AUTHORITY

This guide establishes the theological, disciplinary, and administrative framework for receiving, nurturing, discipling, and recording members of a local African Methodist Episcopal Church. It reflects the doctrine, polity, and governance of the African Methodist Episcopal Church and is intended to assist pastors, class leaders, stewards, and congregations in faithfully carrying out the work of Christian discipleship and stewardship.

II. MANDATE FOR LOCAL CHURCH MEMBERS

The numerous benefits derived from membership in the Christian Church, which is the very Body of Christ, impose upon each member the responsibility of **Christian stewardship**. Christian stewardship is the stewardship of all life, as manifested through our **time, talents, and treasure**.

From the study of God's Word and the unfolding revelation of God's will, it is affirmed that **each member of the Church is a steward**. A steward is one to whom an important trust has been committed. Time, talents, and treasure are gifts of God entrusted to every believer, and the use to which these gifts are applied determines whether one is a faithful steward.

Membership in the Church therefore carries both privilege and responsibility and requires intentional participation in worship, service, discipleship, and generosity.

III. NURTURING AND DISCIPLESHIP TRAINING

All persons coming to the Church with a desire to flee from the wrath to come, but not yet exercising saving faith in the Lord Jesus Christ, may be received for **nurturing and discipleship training** as new members for a period of **ninety (90) days**.

During this period:

- The individual shall be placed under the supervision of a **Class Leader**
- Instruction shall be provided in:
 - The Holy Bible
 - The current edition of *The Doctrine and Discipline of the African Methodist Episcopal Church*
 - AME doctrine, organizational structure, and membership responsibilities
 - The local church membership guide

At the conclusion of the nurturing period, and upon the individual's profession of covenant relationship with God through faith in Jesus Christ, and the **recommendation of the Class Leader**, the individual may be admitted into **Full Membership**.

If, after proper examination, the Class Leader determines the individual is not prepared for full membership, the individual may be removed from the new members list.

IV. PREPARATION FOR MEMBERSHIP

All persons coming to the African Methodist Episcopal Church by profession of saving faith—whether during worship, prayer meeting, revival, or other appropriate occasions—or persons coming from other denominations, shall receive **nurturing and discipleship training for a period of three (3) months**.

During this time:

- Sacramental rites shall not be denied
- Individuals shall be placed under the care of the **Pastor or designee**

Required Areas of Study

1. Assurance of Salvation
2. Articles of Religion
3. History of the African Methodist Episcopal Church
4. Christian Stewardship (Bible study and prayer)
5. Rules and Regulations of the AME Church
6. Introduction to the Bible
7. History and Ministries of the Local Church
8. Catechism on Faith

V. RECEPTION INTO FULL MEMBERSHIP

Upon completion of the required instruction and upon recommendation and approval of the Pastor or designee, individuals may be received into **Full Connection** and issued a **Certificate of Full Membership**.

Members **18 years of age or older**, possessing all qualifications, are entitled to:

- Vote and be voted for
- Hold office in the church
- Serve as Trustee, Steward, Class Leader, Church School Superintendent, or other officer
- Serve as delegates to District, Annual, and General Conferences

VI. ADVANCEMENT IN DISCIPLESHIP

Following reception into full membership, members shall continue their Christian development through a **formal discipleship and continuing education process** implemented by the Commission on Membership, Evangelism, and Discipleship.

VII. CATEGORIES OF MEMBERSHIP

A. Full Membership

1. **New Member** – Profession of faith, completion of discipleship training, and class leader recommendation
2. **Transferred from Methodist Branches** – Certificate of Full Membership required
3. **Transferred from Non-Methodist Branches** – Received through established procedures

B. Preparatory Membership

Youth through age **17** under the care of the Church

C. Affiliated Membership

Members temporarily residing elsewhere who retain home church membership while receiving pastoral care locally

D. Transfer of Membership

Members in good standing may receive a **Certificate of Membership Transfer** and letter of recommendation. Until received elsewhere, the member remains accountable to the issuing church.

VIII. TERMINATION OF MEMBERSHIP

Membership may be terminated **only** by:

- Withdrawal
- Expulsion
- Death

Withdrawal

Withdrawal must be submitted in writing to the Pastor. The Pastor shall issue a **Letter of Withdrawal** and record the action.

Members who withdraw have **no right or title** to church property. Reinstatement requires approval of the Pastor and Quarterly Conference.

Left Without Certificate

- **Nonresident:** Verified absence for three consecutive years
- **Negligent:** Persistent absence and refusal to support the Church

Placement requires Church Conference recommendation and Quarterly Conference vote. Reinstatement may occur upon application.

IX. EXPECTATIONS AND PRIVILEGES OF FULL MEMBERSHIP

- Participation in New Member Orientation
- Eligibility for baptism and communion
- Voting rights at Church Conferences
- Eligibility to hold office
- Pastoral care and funeral privileges (per local policy)

X. CONFIDENTIALITY AND PRIVACY

Membership information shall be used solely for church purposes. Officers and employees must safeguard all personal data and prevent unauthorized disclosure.

XI. NEW MEMBER APPLICATION

NEW MEMBER APPLICATION

Please fill this out and return it to your class leader or the Pastor.

I have received The Lord Jesus Christ as my personal Savior and desire to become an active member of
xxxxxn AME Church.

It is my desire to serve in and support the ministries of this church, as I grow in Christ and share my gifts
with others.

Today's Date: _____

New Member Returning/Recommitment Transfer Membership Affiliated/Temporary

First & Last Name: _____ Date of Birth: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Address: _____ City: _____ Zip: _____

E-Mail: _____

Marital Status:

Single Married Divorced Widowed

Church previously attended (name of church & city/state): _____

Family Members in Your Current Household	Relationship	Birthdate

Have you been baptized (date)? _____ If not, do you wish to be? Yes No

What way(s) do you desire to serve within our church family (based on your interests, abilities, gifts, and time)?

Signature _____ Date _____

For Office Use:

Assigned to Class # _____ Leader: _____

Baptized on: _____ By: _____

Received into Full Membership on: _____

XII. MEMBERSHIP COVENANT

MEMBERSHIP COVENANT

Being convinced that I have been spiritually born into a relationship with God by means of faith in Christ and repentance from sin and being in agreement with Mt Zion's vision, mission, purpose, doctrine and policy, I am led by God to become part of the Mt Zion family. I hereby place myself under the spiritual leadership of this church. In doing so, I am saying the following:

- *I have made a credible profession of faith.*
- *I am committed to living as a follower of Christ.*
- *I am committed to protecting the peace and purity of the church.*
- *I am committed to supporting the worship and work of the church.*

I understand that the above standards cannot be maintained without relying on the Holy Spirit to work in my life and without specific commitments on my part. Having completed the new member's class, I agree with the Standards of Church Membership and do set the following as goals toward which I will strive:

In order to grow as a believer I will strive

- to spend regular time alone with God
- to obey the teachings of Scripture
- to attend worship faithfully
- to partake of communion regularly
- to fellowship with believers in a small group setting
- to share my faith with unbelievers

In order to protect the peace and purity of my church I will strive

- to act in love toward other members
- to refuse to gossip

In order to support the worship and work of my church I will strive

- to discover and use my spiritual gifts
- to pray for Mt Zion's health, growth, and leaders
- to invite the unchurched to attend church
- to welcome warmly those who visit
- to tithe regularly

XIII. MEMBER RESOURCE INVENTORY

MEMBER RESOURCE INVENTORY

God desires every Christ-follower to contribute to the ongoing work of Christ. Jesus came to serve, and we are to follow His example by serving others through Kingdom service. Our prayer has been, and continues to be, that God will send every gift, talent and resource into this congregation; and that everyone God sends become a faithful servant. At Mt. Zion we challenge every believer to serve Christ by giving their time, gifts/talents and financial resources.

Applications may also be submitted online via the Member Resource page at www.mtzionamedover.com

Personal Information:

Prefix/Title: <input type="checkbox"/> Bishop <input type="checkbox"/> Supervisor <input type="checkbox"/> General Officer <input type="checkbox"/> Presiding Elder <input type="checkbox"/> Rev. Dr. <input type="checkbox"/> Rev. <input type="checkbox"/> Deaconess <input type="checkbox"/> Evangelist <input type="checkbox"/> Sister <input type="checkbox"/> Brother <input type="checkbox"/> Other _____		
Last Name:	First Name:	Middle Initial:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Suffix <input type="checkbox"/> Jr. <input type="checkbox"/> Sr. <input type="checkbox"/> Other _____
Age: <input type="checkbox"/> 13-18 <input type="checkbox"/> 19-35 <input type="checkbox"/> 36-65 <input type="checkbox"/> 66+		
Mailing Address: 		
Email Address:		
Home Phone Number:	Mobile Phone Number:	
Best way to contact you?	Best time to contact you?	

<input type="checkbox"/> Email <input type="checkbox"/> Home Phone	<input type="checkbox"/> Mornings <input type="checkbox"/> Evenings
<input type="checkbox"/> Cell Phone	<input type="checkbox"/> Weekdays <input type="checkbox"/> Weekends

General Information:

Are you willing to submit to a background check, if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you speak any other languages fluently? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, which language (s)? _____	
Employed: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired	Do you have a valid Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you available most days? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a valid CDL? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you available most evenings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you available most weekends? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Ministry Experience:

Please check all areas of ministry and service that are now a part of or have been a part of in other ministries or organizations

<input type="checkbox"/> Usher/Marshall/ Greeter/Hospitality	<input type="checkbox"/> Pastor's Aide
<input type="checkbox"/> Choir/Music Ministry/ Dance Ministry	<input type="checkbox"/> Outreach/Evangelism
<input type="checkbox"/> Stewardess/Deaconess	<input type="checkbox"/> Office/Administration
<input type="checkbox"/> Finance	<input type="checkbox"/> Media (Audio/Video)
<input type="checkbox"/> Missionary Society	<input type="checkbox"/> Prayer Ministry
<input type="checkbox"/> Historian	<input type="checkbox"/> Children's Ministry
<input type="checkbox"/> Young Adult Ministry	<input type="checkbox"/> Youth Ministry
<input type="checkbox"/> Transportation	<input type="checkbox"/> Deaf Ministry/Hearing Impaired
<input type="checkbox"/> Men's Ministry	<input type="checkbox"/> Steward Board
<input type="checkbox"/> Newsletter/Publications/Communications	<input type="checkbox"/> Trustee Board

<input type="checkbox"/> Ordained Ministry	<input type="checkbox"/> Women's Ministry
<input type="checkbox"/> Nursing/Healthcare Ministry	<input type="checkbox"/> Other _____
<input type="checkbox"/> Building/Grounds/Maintenance/Repairs	

Personal and/or Occupational Experience

Please check all of the areas that apply

<input type="checkbox"/> Finance/Banking/Accounting	<input type="checkbox"/> Healthcare/Wellness/Fitness
<input type="checkbox"/> Education	<input type="checkbox"/> Travel/Tourism/Hotel
<input type="checkbox"/> Marketing/Sales	<input type="checkbox"/> Secretarial/Data Entry/Filing
<input type="checkbox"/> Athletics	<input type="checkbox"/> Human Resources/Recruiting
<input type="checkbox"/> Law	<input type="checkbox"/> Sponsorship/Grant Writing
<input type="checkbox"/> Law Enforcement/Security	<input type="checkbox"/> The Arts (Music/Visual/Dance/Written)
<input type="checkbox"/> Logistics	<input type="checkbox"/> Printing/Publications/Journalism
<input type="checkbox"/> Photography	<input type="checkbox"/> Interpreter
<input type="checkbox"/> Seamstress/Fashion/Textiles	<input type="checkbox"/> Food Service/Catering/Bakery
<input type="checkbox"/> Hospitality/Customer Service	<input type="checkbox"/> Communications/Broadcasting
<input type="checkbox"/> Information Technology/Social Media	<input type="checkbox"/> Programming/Software
<input type="checkbox"/> Religious/Ecumenical Affairs	<input type="checkbox"/> Custodial/Janitorial
<input type="checkbox"/> Supervision/Management	<input type="checkbox"/> Interior Design/Decorating
<input type="checkbox"/> Special Needs/Disabilities	<input type="checkbox"/> Historian/Research/Scholarship
<input type="checkbox"/> Politics/Government	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Event Planning	<input type="checkbox"/> Medical/Nursing
<input type="checkbox"/> Construction/Plumbing/Carpentry/Electrical	<input type="checkbox"/> Science/Medical
<input type="checkbox"/> Warehouse/Factory	<input type="checkbox"/> Transportation/Driving
<input type="checkbox"/> Community organizing/activist	<input type="checkbox"/> Other _____

What do you understand your gifts, talents and skills to be?

Please check all of the areas that apply

<input type="checkbox"/> Encouragement/Team Building	<input type="checkbox"/> Hospitality	<input type="checkbox"/> Administration
<input type="checkbox"/> Faith/Prayer/Intercession	<input type="checkbox"/> Serving	<input type="checkbox"/> Leadership
<input type="checkbox"/> Multi-tasking/Organization	<input type="checkbox"/> Giving	<input type="checkbox"/> Music/Arts
<input type="checkbox"/> Advanced Computers skills	<input type="checkbox"/> Interpersonal	<input type="checkbox"/> Stewardship
<input type="checkbox"/> Communications (Spoken/Written)	<input type="checkbox"/> Strategic Thinking	<input type="checkbox"/> Editing/Proofreading
<input type="checkbox"/> Graphic Design	<input type="checkbox"/> Sales/Marketing	<input type="checkbox"/> Helps/Helping
<input type="checkbox"/> Working with Children	<input type="checkbox"/> Patience	<input type="checkbox"/> Detail Oriented
<input type="checkbox"/> Technology/Social Media	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Basic Computers skills	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Applicant Signature: _____ Date: _____