

**TWELFTH BAPTIST CHURCH**

**REV. WILLIE BODRICK II**

**SENIOR PASTOR**

**DIACONATE IN-TAKE FORM**

*(Please Print Clearly)*

**Today's Date**

Mr. Mrs. Ms.

Miss Rev. Dr.

**Last Name**

**First Name**

**Middle Initial**

**Address:**

**No.**

**Street**

**City**

**State**

**Zip**

*Mailing Address  
(if different from  
above)*

**No.**

**Street**

**City**

**State**

**Zip**

**Home Telephone Number**

**Work Telephone Number**

**CIRCLE REASON(S) FOR RESPONSE TO INVITATION**

Accepting Christ

Counseling

Church Membership (please indicate appropriate type)

Baptismal Candidate

Christian Experience

Associate/Watchcare

Reinstatement

Other

(please specify)

**PREVIOUS CHURCH RECORD**

**Former Church:**

**Name**

**Address**

**No.**

**Street**

**City**

**State**

**Zip**

**Name of Pastor/Minister**

**Length of Membership**

**Date Last Attended**

**List organization in  
which you were active:**

**How can this  
church help you?**

**PERSONAL INFORMATION**

**Date of Birth**

**Place of Employment**

**Occupation**

**List hobbies, talents or special abilities**

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**Marital Status** (*check one*)    Married    Single    Divorced    Separated    Widowed

**Name of Spouse**

**Names/Ages of Children**

Do you know any members of TBC?    Yes    No

If Yes, names

**EMERGENCY CONTACTS**

**Name**

**Relationship**

**Address**

**No.**

**Street**

**City**

**State**

**Zip**

**Telephone number(s)**

**Interviewed by**

**Signature**

**FOR DIACONATE USE ONLY**

Date/Day Next Class

Class Attended (Date)

Date Completed

Date Accepted Into Membership