

**TESTIMONY/INFORMATION QUESTIONNAIRE**

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

EMAIL \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ ANNIVERSARY \_\_\_\_\_

Names and dates of birth of children living at home:

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

From your Bible knowledge, how is a person saved?

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

Approximately when did you admit that you were a sinner and ask Jesus to forgive you and save you? How old were you? Were you at church, at home, at school etc.? Who helped you see your need for salvation?

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

What gives you assurance of salvation and eternal life?

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

Have you been baptized by immersion? Yes \_\_\_\_ No \_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_