



National Council of Churches of Singapore
 新加坡基督教全国教会理事会
 1 Coleman Street, #B1-27, The Adelphi, Singapore 179803
 Tel : 6336 8177 Fax: 6336 8178
 Email: admin@nccs.org.sg, Website: www.nccs.org.sg

APPLICATION FOR MEMBERSHIP

1.	Name of Church/ Organisation	
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2.	Address :	
	Postal Code	

3.	Contact Person:	
	Tel No. (O):	
	Mobile No.:	
	Email:	
	Website:	

4.	Registration No.:	
	Date of Registration:	

5.	Category of Membership <input type="checkbox"/> Full Member <input type="checkbox"/> Congregational Member <input type="checkbox"/> Associate Member
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6.	Membership Details	
	▪ No. of Worshipping Members:	
	▪ No. of Confirmed or Registered Members:	
	▪ Profile of Worshippers (by % terms)	
	<ul style="list-style-type: none"> ▪ Adults ▪ Children ▪ Elderly ▪ Youth 	

7.	Pastor-in-Charge:	
	Education Background: <i>(Please attach documents of Pastor's theological education)</i>	

8.	Mission Statement: <i>(Please enclose a copy of your Church/Organisation Articles of Faith and Constitution)</i>

9.	List of Current Board Members				
	Name	Designation	Occupation	Years of Service	Singapore Citizen or PR (country of origin)

10.	Worship Services & Times:	
	<input type="checkbox"/> English	
	<input type="checkbox"/> Mandarin	
	<input type="checkbox"/> Other Languages (please specify)	

11.	Reasons for Joining NCCS:

12.	Please provide Two Referees: <i>(at least one referee should be from a NCCS member church)</i>				
Name of Church	Pastor's Name	Address	Contact		
			Office	Mobile No.	Email Address

13.	Other Relevant Information:

Please check 'X' in the box below

We will abide by the Constitution of the National Council of Churches of Singapore

Signature of Applicant	Name of Applicant (Board Chairman/Member)	Date of Submission

Checklist

- Application Form**
- Constitution/Statement of Faith**
- Latest Audited Financial Statement**
- List of Current Board Members**
- Names of Referees**
- Pastor's Theological Education**
- Proof of registration with ACRA or ROS**
- Other Relevant Documents (please specify)**

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