

DISCIPLESHIP INFORMATION FORM



PERSONAL INFORMATION

Name _____ Email _____

Cell Phone Number _____ Birth Date _____

Address _____

Education or Occupation _____

Marital Status _____

Children (Name + Age)

_____	_____
_____	_____
_____	_____
_____	_____

EXPECTATIONS

- I desire to grow in my knowledge of the Lord and live a life that glorifies Him.
- I am willing to commit to studying God's Word.
- I prefer to meet weekly. _____
- I prefer to meet bi-monthly. _____
- I agree to be an active participant in sharing and praying.
- I want to share my faith with others.

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EXPECTATIONS CONT.

Why do you want to be discipled at this time?

Is there any other information you would like to share?

*May the Lord lead you in His ways and for His glory.
Looking forward to speaking to you soon!*

Save and complete the form, then email to women@gracewaybible.org.