

WHAT IS A CBMC MEMBER?

- 1. He has a personal relationship with The Lord Jesus Christ.
- 2. He belongs to a church where Jesus Christ is proclaimed as Lord and Saviour.
- 3. It will be expected of him to regularly attend the CBMC prayer meetings.
- 4. And, to be actively involved in prayer in such meetings where prayer is made for CBMC activities and for unsaved business-and professional people.
- 5. The prayer-chairman will help him to identify target men and to put their details on the blue prayer cards. These men will then be prayed for by the team at every weekly Prayer Meeting.
- 6. The Member must feel at home in the group, and be encouraged to take part in the discussions during the Bible study.
- 7. In due time he will be exposed to the Outreaches and will then be expected to participate in Office Visitation in the company of an experienced CBMC'er.
- 8. He should, at the earliest opportunity attend a CBMC Orientation presentation. Preferably together with his wife. At such an Orientation, the whole CBMC process will become evident and he will be able to make an informed decision re his involvement in CBMC.
- 9. If he has not yet been discipled, it will be good for him to be taken through Operation Timothy by one of the team members.
- 10. He will also be given the opportunity to give his testimony to the team.
- 11. He must be encouraged and challenged to have a regular Quiet time, a time alone with God.
- 12. He must be encouraged to use a "Ten most wanted" card during his personal quiet time, and to pray regularly for those people by name.
- 13. He will be encouraged to contribute financially to the needs of CBMC by debit order or any other convenient means.



Membership Registration

New Members only

Surname			Initials		Date of birth					
Name			L		Langu	age		Α	Е	
Wife's name					Date of birth					
Cell phone					Tel (H)					
Tel (W)					Fax					
e-mail										
address										
Residential										
address										
Postal										
address										
	Vocation		Other qualifications	ther qualifications Shirt size		Golf	Business name			
						player				
Self										
Spouse										
Children's names and age			1.	2.			3.			
CBMC Team			l							

Please email to info@cbmc.co.za or fax to 086 524 7941.

Please sign the Commitment Form after you read the Conditions.



COMMITMENT of CBMC MEMBER

Name:

Team: Herewith I accept the challenge of the CBMC ministry (see p3), an
Herewith Laccent the challenge of the CRMC ministry (see n3) an
undertake, in great dependence on the Lord Jesus Christ, and to the best of my ability, to take up the responsibility as a CBMC member and to be held accountable.
I agree further to pay the membership fee of R350.
CBMC Banking details: Bank: FNB Account No.: 6236 1233 176 Branch code: 201410 Ref: Name & membership fee
As soon as we receive the proof of payment you will receive your CBMC Welcome Pack.
Signature Date
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DEBIT ORDER AUTHORITY

A. Authority
Given by (name of account holder)
Address
Bank
Branch and Code
Account Number
Type of Account (delete that which is not applicable) Current (Cheque) / Savings / Transmission
Amount
Date
To (name of beneficiary)CBMC SA
Abbreviated Name as Registered with the Bank
Beneficiary's Address VREDENHOF, MAIN ROAD/R45, NORTHERN PAARL
This signed Authority and Mandate refers to our contract dated ("the Agreement").
I/We hereby authorise you to issue and deliver payment instructions to your Banker for collection against my/our above-mentioned account at my/our above-mentioned Bank (or any other Bank or
branch to which I/we may transfer my/our account) on condition that the sum of such payment
instructions will never exceed my/our
obligations as agreed to in the Agreement and commencing on and continuing until this Authority and
Mandate is terminated by me/us by giving you notice in writing of not less than 20 ordinary working
days, and sent by prepaid registered post or delivered to your address as indicated above.
The individual payment instructions so authorised to be issued must be issued and delivered as
follows: monthly, bimonthly, three monthly, six monthly, annually, weekly, bi-weekly (delete that which
is not applicable)
In the event that the payment day falls on a Sunday, or recognised South African public holiday, the
payment day will automatically be the very next ordinary business day. Furthermore, if there are
insufficient funds in my account to meet the obligation, you are entitled to track my account and re-
present the instruction for payment as soon as sufficient funds are available in my account.
I/We understand that the withdrawals hereby authorised will be processed through a computerised
system provided by the South African Banks. I also understand that details of each withdrawal will be
printed on my Bank statement. Such must contain a number, which must be included in the said
payment instruction and if provided to me should enable me to identify the Agreement. This number
must be added to this form in Section E before the issuing of any payment instruction. B. Mandate
I/We acknowledge that all payment instructions issued by you shall be treated by my/our above-
mentioned Bank as if the instructions have been issued by me/us personally.
C. Cancellation
I/We agree that although this Authority and Mandate may be cancelled by me/us, such cancellation will
not cancel the Agreement. I/We shall not be entitled to any refund of amounts which you have
withdrawn while this Authority was in force, if such amounts were legally owing to you.
D. Assignment
I/We acknowledge that this Authority may be ceded or assigned to a third party if the Agreement is
also ceded or assigned to that third party, but in the absence of such assignment of the Agreement,
this Authority and Mandate cannot be assigned to any third party.
Signed aton thisday of20
Signature (as used for operating on the account)
Assisted By
E. Agreement Reference Number
This Agreement reference number is: (office use only)