

2018 Evangelistic Ministry Association Renewal Document

I, _____, as President of (ministry name) _____ do hereby apply for renewal of the association of (ministry name) _____ with Faith Christian Fellowship International Church, Inc., in accordance with the documents of the original association executed on _____.

I do hereby certify that I have been authorized by the governing body of (ministry name) _____ to execute this application, annual ratification, and renewal.

Ministry Name

Signature of President

Renewal fee is \$100, if paid before 1/31/18, or \$200, if paid after 1/31/18.

Pay by Check AMEX Visa MasterCard Discover
For payment other than check, a 3 % processing fee will be charged

Credit Card Number

Expiration Date

Signature

For office Use Only

Renewal for 2018 Received _____ Fee Paid _____

_____ Approved _____ Rejected

Faith Christian Fellowship International Church, Inc.

Signature of FCF Board Member reviewing renewal

Date Reviewed

Rev. 6/2017

FCF Associate Evangelistic Ministry 2018 Renewal Questionnaire

Please type or print

Ministry Information

Name _____

A.K.A. or D.B.A. _____

Mailing Address _____

City/State/Zip _____

Phone _____ Fax _____

Street Address _____

City/State/Zip _____ Website _____

Email _____ Employer I.D. _____

Responsible Minister Information

Name _____ Spouse _____

Home Address _____

City/State/Zip _____ Phone _____

Email _____ Cell Phone _____

Ministry Information

Write a short summary of your ministry in 2017 and what you see happening gin the Body of Christ at large.