



**APPLICATION FOR SICKNESS/ACCIDENT ASSISTANCE
FROM MINISTERIAL BENEVOLENT FUND**
International Church of the Foursquare Gospel

MP-11

ELIGIBILITY

The Ministerial Benevolent Fund is created from a portion of the annual credential fee and is disbursed by the Board of Directors as gifts to Foursquare ministers participating in the fund for emergency assistance for sickness or accident. It is not an insurance fund. Ministers who have paid the current year's fee are eligible to apply. However, decisions are made in light of the length and continuity of participation in the plan and the availability of funds. Benefits are unavailable for dependents, dental procedures (unless surgically necessary or crowns), vision (unless surgically necessary), maternity or elective procedures.

INSTRUCTIONS

1. Please attach "copies" of your receipts for all of your personal OUT-OF-POCKET expenses.
2. Complete this form and email or mail to your District office.

1. Full Name _____

2. Home Address (Number and Street) _____

City _____ State _____ Zip Code _____

3. ☐ Currently in Active Ministry Position _____

☐ Retired

4. Describe the nature of your illness or accident: _____

5. Approximate TOTAL medical cost: \$ _____

6. Approximate TOTAL amount paid by insurance or other sources: \$ _____

7. TOTAL balance paid, or to be paid, by you: \$ _____

Date Signed: _____

Applicant's Signature: _____

Date Signed: _____

District Supervisor Signature: _____

FOR DISTRICT OFFICE USE ONLY

Date First Credentialed: _____

Current Year Credential Fee Paid ☐ Yes ☐ No

Number of Distributions Previously Received: _____

Number of Distributions Currently Requested: 1st ____ 2nd ____ 3rd ____

Distributions: Up to \$1,000 each, with a max of \$3,000