

Evangel Fellowship International - Individual Membership Application

Minister's Name	Ordination <input type="checkbox"/>	
	License <input type="checkbox"/>	
	Christian Worker's certificate <input type="checkbox"/>	
Name of Spouse	Ordination <input type="checkbox"/>	
	License <input type="checkbox"/>	
	Christian Worker's certificate <input type="checkbox"/>	
Address		
City	State	Zip
Home Phone	Cell Phone	
E-Mail		
Website		

Name of Church		
Is the church a member of EFI?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Pastor		
Address		
City	State	Zip
Church Phone	Fax	
E-Mail		
Website		
Do you want your home phone number listed in the Membership Directory?		Yes <input type="checkbox"/> No <input type="checkbox"/>
Current Credentials: Ordination <input type="checkbox"/> License <input type="checkbox"/> Christian Worker's certificate <input type="checkbox"/> Date granted:		
Credentials with:		
Do you plan to retain these credentials? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Please describe your ministry, and any relationships you already have with others in EFI		

Please give a reference of an EFI minister you know:		
Minister's Name	Position	
Address		
City	State	Zip
Home Phone	Cell Phone	
Please give two additional references:		
Name	Position	
Address		
City	State	Zip
Home Phone	Cell Phone	
Name	Position	
Address		
City	State	Zip
Home Phone	Cell Phone	

Payment			Total:
Application Fee		\$25	\$25
Annual Membership Dues	Couple	\$200	\$
	Individual	\$150	\$
		Total due	\$
Make checks payable to Evangel Fellowship International			
Discover MC Visa	Card #	Exp.	CVV:
Name on card		Signature	

Return this form with your payment to: Evangel Fellowship International, PO Box 326, Conway, SC 29526.
 Phone: (843) 347-6184 Fax: (843) 347-3776

EFI Office Use Only:

Date received	Amount received
Processed by	Date processed
Region	Clergy cards sent