

Evangel Fellowship International - Ministry Membership Application

Name of Ministry		EIN#
Address		
City	State	Zip
Church Phone	Fax	
E-Mail		
Website		
Leader's Name		
Name of Spouse		
Home Phone	Cell Phone	

Current EFI member recommending your ministry for affiliation:

Name:		Signature:	
Address:	City:	State:	Zip:

Please attach Articles of Incorporation and Federal EIN letter	Yes <input type="checkbox"/>
Please attach Constitution, Bylaws, and Statement of Faith	Yes <input type="checkbox"/>
Does your ministry keep records of finances and minutes? <small>(required by IRS)</small>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is your ministry recognized separately by the IRS as a 501c3?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If not, do you wish to be included in IRS Group Exemption Number 8044 for 501c3 coverage?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the ministry a member of another denomination or fellowship?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If YES, please give the name of the organization:	

Payment		Total:
Application Fee	\$25	\$25
Annual Membership Dues	\$150	\$150
Make checks payable to Evangel Fellowship International		
Total due	\$175	\$175
Amex Disc MC Visa	Card #	Exp.
		CVV
Name on card		Signature

Ministry membership includes two "members only" rate registrations for the Annual Conference. Ministry members are encouraged to support the Fellowship by attending the conference, and financially as ministry funds allow.

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	Certificate sent