

# Fellowship of Churches & Ministers International

PO Box 2165 \* Reidsville, GA 30453 \* (912) 557-6507

## Application for Church Affiliation

**Instructions: This application must be filled out in duplicate. A copy of Church Constitution, and an application fee must be included as follows: 1-25 members: \$50, 26-50 members: \$75, 51-75 members: \$100., 76-199 members: \$150, 200 and Up: \$200**

Employer's Identification Number \_\_\_\_\_ Date of application \_\_\_\_\_

Do you have tax exempt status with IRS? \_\_\_\_\_

Church Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Website: www. \_\_\_\_\_ Email: \_\_\_\_\_

Church Street Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_ Web site \_\_\_\_\_

Church Mailing Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Pastor \_\_\_\_\_ Phone( ) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Church Treasurer \_\_\_\_\_ Church Secretary \_\_\_\_\_

Is the Church Incorporated? \_\_\_\_\_ When? \_\_\_\_\_ What State? \_\_\_\_\_ Empl. Tax ID # \_\_\_\_\_

Do you have a Church Constitution? \_\_\_\_\_ By Laws? \_\_\_\_\_ Statement of Faith? \_\_\_\_\_

Does your church keep a record of Finances and Minutes? \_\_\_\_\_ If not, will you do so? \_\_\_\_\_

Do you have a church membership Listing? \_\_\_\_\_ Number of members: \_\_\_\_\_

Average church attendance: \_\_\_\_\_ Will you do your best to be an active part of the fellowship? \_\_\_\_\_

Do you plan to grant Ministerial Ordinations? \_\_\_\_\_

Pastor's Signature: \_\_\_\_\_ Secretary's signature? \_\_\_\_\_

Current FCMI Member recommending your church for affiliation: William Ligon Sr.

Signature William Ligon Sr. Phone ( ) 912-264-0028

Address: 4265 Norwich St. City Brunswick State GA Zip: 31520