

MESSENGER FELLOWSHIP – Application for Association

Office Use Only

Date Received ___/___/___
 Fee Received _____
 Approved ___/___/___
 Data Entered ___/___/___

To make application to be a Messenger Fellowship Associate Member, please provide the following information. Remember to enclose a check made out to Messenger Fellowship for the appropriate annual fee or pay through PayPal on the Messenger website at www.messengerfellowship.com.

Association Fee - \$125

Missionary Association Fee - \$62.50

Personal Information:

Full Name _____ Address _____
 City _____ State _____ Zip _____ Country _____
 Home Delivery (FedEx) Address _____
 Home Phone _____ Work Phone _____ Cell Phone _____
 Fax _____ Email _____ Birth Date _____
 Your current marital status? Single, never married Married Separated Divorced Remarried Widowed
 Anniversary _____ Spouse's Name _____ Spouse's Birth Date _____
 Further information on your marriage? _____
 Children/Birth dates _____

Education _____

Ministry Information:

Are you currently involved in ministry? Full-time Part-time Not currently Years in ministry? _____
 Name of Current Ministry _____ Your Present Position _____
 Ministry Address _____ City _____ State _____
 Country _____ Zip Code _____ Phone _____
 Website Address _____ Email _____
 Briefly describe your current ministry _____
 Any other ministry information Messenger Fellowship should be aware of? _____

I understand that my Application for Association with Messenger Fellowship is subject to approval by a review committee and must be renewed on an annual basis. I also understand that this is an association that is built upon the integrity of healthy and honest relationships. Therefore, I affirm that all of the information on this form is, to the best of my knowledge, true in all respects. I further agree to release Messenger Fellowship International, Inc., its officers, directors, or council members from any and all liability or litigation in regards to my affiliation or association with them. In addition to confirming my agreement with the terms of this application and attesting that it is truthfully submitted, my signature below hereby indemnifies them against any and all future litigation.

I understand that as an Associate it is my responsibility to represent the character and values of Messenger Fellowship International, Inc. and walk in unity with its members and ministries.

 Applicant Signature

 Date