



## MEMBERSHIP APPLICATION

Name of Faith Community \_\_\_\_\_

Denomination \_\_\_\_\_

Location Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

Name and email of clergy:  
\_\_\_\_\_  
\_\_\_\_\_

Name of Bishop or Judicatory Head: \_\_\_\_\_

*Faith communities with membership under 500 may have two (2) delegates: over 500 three (3) delegates*

Name	Address	Telephone number	Email Address

Authorized Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_