

Independents Fellowship International (i.f.i.)

Application for Affiliation

PERSONAL INFORMATION

Name: _____
Application Date: _____
Street Address: _____
City: _____
State: _____
Zip: _____
Country: _____
Phone #: _____
E-mail: _____
Birthday: _____
Spouse Name: _____
Spouse Birthday: _____

EDUCATION (statistical purposes only)

High School: _____
City: _____
State: _____
Graduation Date: _____
College: _____
City: _____
State: _____
Graduation Date: _____
Major: _____
Check One: _____
 Bachelor's Master's Phd
 Other _____

FOR INDIVIDUAL AFFILIATES

List any non-preaching ministries:

FOR CHURCH / MINISTRY AFFILIATES

Church Name: _____
Sr. Pastor Name: _____
Date Organized: _____
Date Installed: _____
Church Address: _____
City: _____
State: _____
Zip: _____
Country: _____
P.O. Box Address: _____
City: _____
State: _____
Zip: _____
Country: _____
Church Phone: _____
Church Fax: _____
E-mail: _____
of Members: _____

Would you like your church to be advertised on the *i.f.i.* website?

- yes
- no

Do you have a media ministry? (Check all that apply):

- TV
- Radio
- International
- Local

List other unique ministries:

List any books authored within the ministry:

INITIAL APPLICATION FEE

Check One:

_____ Church Fee \$195 (*annual renewal fee is \$100*)

_____ Ministry with no congregant body \$105 (*annual renewal fee is \$55*)

_____ Individual Fee \$50 (*annual renewal fee is \$25*)

I do hereby pledge to affiliate with Independents Fellowship International and thereby voluntary submit to its tenets and structure. I understand that by doing so I do not surrender any of the autonomy that is characteristic of being a Christian church. I further pledge to offer my gifts and talents in building this family of faith and move of God.

Referred by: _____

Save this application and email it to ateam@ifichurches.org OR print and mail to *i.f.i.*, P.O. Box 280968, Memphis, TN 38168-0968
