



Canadian Fellowship Of Churches And Ministers
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Prince Albert, SK S6V 2A5
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Website: www.cfc.org

APPLICATION FOR AFFILIATION BY A CHURCH OR MINISTRY

Instructions:

This application must be filled out in its entirety and signed by all of the appropriate Officers. A photocopy of the application should be kept for your records. The original application should be forwarded to the CFCM National Office at the address identified above. An application fee of \$25.00 must accompany the application. Upon approval of the church or ministry, you will be invoiced for the annual membership fee of \$25.00 for the current year (the fee cannot be prorated). The annual fee will be invoiced by November 15th of each and every subsequent year and shall be effective from January 1st to December 31st.

NAME: _____

ADDRESS: _____

CITY: _____ PROVINCE: _____

POSTAL CODE: _____

PHONE: () _____ FAX: () _____

E-MAIL ADDRESS: _____

WEBSITE ADDRESS: _____

Meeting location, if different from above: _____

Name of Pastor: _____

Name of Secretary: _____

Name of Treasurer: _____

Date Church or Ministry Started: _____

Have you been Incorporated?: _____

If so, When? _____ Where? _____

Do you have a Constitution and/or By-Laws? _____

Do you have a Statement of Faith? _____

Are accurate records of finances and accurate minutes of all business kept? _____

NOTE: Accurate financial records are required by Canada Customs and Revenue Agency.

NOTE: If you own property, it is recommended that you have a system of recognized members which is maintained only for those who meet standards of requirements and faithfulness in attendance and financial support. (Should be updated annually)

Is your Board in Agreement with the nature and purpose of CFCM? _____

Will your Church/Ministry endeavor to be an active part of this fellowship? _____

Signature of Pastor

Date

Signature of Secretary

Date

Signature of Director

Date

Signature of Director

Date

Signature of Director

Date

Signature of Director

Date