

INDEPENDENT ASSEMBLIES OF GOD INTERNATIONAL (Canada)

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Our Task Presenting the Gospel in Word and Deed to All Nations

FORM 4 ANNUAL RENEWAL

TO BE FILLED OUT ANNUALLY BY SPONSORING CHURCH

This form is to be filled in annually by Commissioned Christian Workers, Licensing or Ordaining Church of the Applicant

Name of Applicant: **PRINT CLEARLY** _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Phone: Area Code [] _____

E-mail: _____ Website: _____

Does candidate hold? Commissioned Christian Workers [] License [] Ordination []

COMMISSIONED CHRISTIAN WORKER, LICENSING OR ORDAINING CHURCH INFORMATION:

Church Name: _____

Church Address _____

City: _____ Province: _____ Postal Code: _____

Phone: Area Code [] _____ Fax: Area Code [] _____

E-mail: _____ Website: _____

Church Taxation Number: _____ Obtained by: Private [] I.A.O.G.I. []

Name and Address of Pastor of Commissioned Christian Workers, Licensing or Ordaining Church:

Pastor's Name _____ Address _____

City: _____ Province: _____ Postal Code: _____

Phone: Area Code [] _____ Fax: Area Code [] _____

E-mail: _____ Website: _____

We certify that the above named applicant continues to be affiliated with this local church and is in good standing, and that the original purpose for holding credentials with the Fellowship still hold true. Any changes in the candidate's situation are recorded below.

The candidate's field of ministry in the past has been?

He/she is in active ministry? YES [] No []

Does he/she subsidize his/her income with secular work? YES [] No []

Signature of Pastor: _____ Date: _____

Signature of Church Secretary: _____ Date: _____

In the event that this application is not accepted, the fee will be returned in full.
Failure to renew annually will result in your credentials being revoked.