

2011 CREDENTIAL RENEWAL

Gospel Crusade Ministerial Fellowship
192 Cocalico Creek Road, Stevens, PA 17578

(PLEASE PRINT)

Name: _____ Home Phone: _(_____)_____
Address: _____ Office/Cell Phone: _(_____)_____
_____ Fax: (_____)_____
_____ Email: _____
City: _____ State: _____ Zip: _____

Check box if any of the above information represents a change

Please identify your primary ministry

(Check only One)

___ Pastor ___ Evangelist ___ Music
___ Assoc. Pastor ___ Youth ___ Children
___ Minister ___ Chaplain ___ Outreach
___ Teacher ___ Missionary (Itinerant)
___ Other ___ Missionary (Resident)

*See Ministry Category Descriptions - Page 1

Local Church Affiliation

Church Name: _____

Address: _____

City/State/zip: _____

Phone: _____

Denomination/Affiliation: _____

Senior Pastor: _____

Approximate number of people attending Sunday
A.M. service or main weekly meeting: _____

Please provide all requested information

Gospel Crusade Ministerial Fellowship Credential Information

Current Credential Held

Renewal Fee

___ Ordination	\$40.00
___ Ministerial License	\$40.00
___ Able Worker	\$40.00

___ **Missionary renewal rate \$10.00**

The above selection represents a requested change

*A letter of recommendation from your pastor MUST accompany a request for credential status change.
Please ATTACH THE LETTER to this form and mail to your district coordinator.*

