## **2006 MEMBERSHIP APPLICATION**

## for Churches

RECD

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## CHURCH INFORMATION

Church Name					
Mailing Address					
City			State	Zip	
Phone	FAX	Web site			
Church Location (where	e you worship, if different from above)	City	State	Zip	
PASTOR'S CONTACT	INFORMATION				
Pastor Bishop R	Rev. 🛛 Dr. 🗖 Other Ser	ior Pastor			
Email		Phone	 Alternate Pho	Alternate Phone	
Spouse Name & Full Title (exactly as spouse should be addressed )		)			
Executive Assistant		Phone	Email	Email	
Preferred Project Bridges Contact (if different from Senior Pastor)		Phone	Email		
GENERAL INFORMAT	ΓΙΟΝ				
Church Denomination					
Please approximate the i	number of each of the following:I	MembersEmployees _	Ordained Ministers	Full-time Ministers	
Please provide the names	s and contact information for those with the	e following positions, if applicable:			
Church Administrator		Phone	Email	Email	
Youth Pastor/Youth Ministry Director		Phone	Email	Email	
Men's Ministry Director		Phone	Email	 Email	
Women's Ministry Director		Phone	Email	Email	
Evangelism/Outreach Director		Phone	Email	Email	
MEMBERSHIP INFORM	1ATION				
	□ New Member □ Renew	wing Member The \$300 m	nembership fee is enclose	ed.	
		le Geneture			
project	Senior Pastor's Signature		Date		
bridges	3600 Brightseat Road • La	indover, MD 20785 • Pho	ne 301-386-0300 + E	AX 301-262-0305	