WORLD
ASSEMBLIES OF GOD FELLOWSHIP

MEMBERSHIP APPLICATION

Requirements of membership include agreement with the Statement of Faith and the Nature and Function of the Fellowship. Members must also accept responsibility for assisting in the furtherance of the purpose and work of the World Assemblies of God Fellowship, which includes annual financial membership dues. The obligations and privileges inherent in such a relationship are stated in the World Assemblies of God Constitution and Bylaws. The Executive Council meets once a year to discuss and review all submitted membership applications. All applications received are sent to their respective regional representatives for insight and recommendations to our Executive Council before the annual meeting.

NAME OF ORGANIZATION _____

LOCATION (COUNTRY) OF ORGANIZATION _____

TOTAL NUMBER OF CHURCHES _____

CONGREGANT COUNT _____

GENERAL SUPERINTENDENT _____

Whereas we have declared our intention to share in the privileges and to assume the responsibilities of identification with the fraternal Fellowship known as the World Assemblies of God Fellowship, we do hereby request membership in this Fellowship. We agree with the WAGF Statement of Faith and the Nature and Function of the Fellowship and accept responsibility for assisting in the furtherance of the purpose and work of the World Assemblies of God Fellowship, which includes annual financial membership dues. ☐

OFFICIAL SIGNATURE _____ **DATE** _____

TITLE _____

WAGF Executive Leadership Team
Rev. Dominic Yeo, Chairman
Rev. Doug Clay, Vice Chairman
Rev. Juan Carlos Escobar, Secretary
World Assemblies of God Fellowship
Email: Chairman@WorldAGFellowship.org

WORLD
ASSEMBLIES OF GOD FELLOWSHIP

MEMBERSHIP APPLICANT PROFILE FORM

ORGANIZATION INFORMATION

NAME OF ORGANIZATION _____

LOCATION (COUNTRY) OF ORGANIZATION _____

ORGANIZATION HISTORY

_____

_____

MOTIVATION FOR APPLYING FOR MEMBERSHIP

_____

_____

MISSION/VISION

_____

_____

CONTACT INFORMATION

NAME OF GENERAL SUPERINTENDENT/NATIONAL LEADER

_____

☐ Rev. ☐ Dr. ☐ Pastor ☐ Other: _____

ORGANIZATION ADDRESS

_____

MAILING ADDRESS (if different from address above)

_____

EMAIL ADDRESS(ES) _____

OFFICE _____

MOBILE _____

WHATSAPP NUMBER _____

*Is this a sensitive country? ☐ Yes ☐ No