♦ ONLY 5 MINUTES OF YOUR TIME IS NEEDED—THANK YOU! ♦



Annual Credential Renewal Form DEADLINE—October 1st

If received after October 1st, must pay \$100 late fee.

RENEWAL FEE: Licensed Minister \$50.00—Ordained Minister \$75.00 *Note: Monthly giving Commitment must be up-to-date.

SECTION ONE:

□YES, RENEW my ministerial credential status as: (check only one please) □Licensed Minister □ Ordained Minister □ Send info on how to upgrade from Licensed to Ordained Minister

TYES, I am up-to-date on my monthly financial commitment— **INO**, If no, please include giving along with renewal fee

DNO, do not renew my credential. Complete "section two" and return to our office along with your credential certificate and card.

SECTION TWO

Name		Credential Number:				
Address:						
City:	State:	Zip:				
Home Phone: ()	Min	istry/Bus. Phone: ()				
Cell Phone:	Fax #					
Email:Website:						
SECTION THREE 1) Marital Status: □Single □Married □Widowed □Divorced/Separated 2) Has this status changed since last renewal? □Yes □ No 3) If married: Spouse Name:						
SECTION FOUR						
I AM PRESENTLY INVOLVED IN THE MINISTRY OF (check all that apply)						
Evangelism Teaching Counseling Pastoring Missionary Music/Worship Ministry						
Children Ministry DYouth Ministry Chaplain Other						

CONTINUE ON BACK PAGE

SECTION FIVE—ANSWER THIS SECTION ONLY IF YOU ARE A PASTOR (if not skip to Section 6 & 7)

1)	Name of Church You Pastor				
1	Address:	_ City	State	Zip	
	Is your church affiliated with ICCAN Fellowship D Yes			-	
3)	If no, would you like information on how to affiliate your c	hurch with ICCAN?	□No		
	CTION SIX—IF YOU ARE <u>"NOT"</u> A PASTOR ANSWI		-	en skip to Section 7)	
1)	What type of ministry are you involved in:				
2)	Does your ministry have the $501(c)(3)$ tax-exempt status?				
3)	Name of the "Home Church" you attend when not minister	ing:			
4)	astor's Name:Phone Number:				
SE 1) 2)	CTION SEVEN—YEARLY MINISTERIAL ACTIVITY How many of the following have you conducted in past year? Weddings Funerals Baby Dedicati Communions Revivals/Special Meetings What is your primary goal in ministry for the coming year? (<i>Pleas</i>	ons Baptisms Approx. number of sermons pre	eached		
3)	Would you like an information packet on how to further your Chr distance learning? Yes No If yes, what degree level i		-	-	

The following information is required of all credential levels of membership and will be kept confidential. This information enables the Executive Board to propose a budget for the upcoming fiscal year and helps determine the future expansion of our domestic and world missions. Your assistance is greatly appreciated. - Thank You!

FOR "PROFESSIONAL LEVEL" LICENSED & ORDAINED MINISTER:

I renew my commitment as a credentialed Licensed or Ordained minister of the ICCAN Fellowship and agree to abide by the Constitution & Bylaws. I agree to continue to give each month the amount of \Box \$35 (Licensed) \Box \$45 (Ordained) As required for my credential level. (*Optional*) *I would like to give above my required giving an offering of* \$_____ \Box *Monthly* \Box *Yearly* \Box *Other*_____

ADDITIONAL COMMENTS: _____

ENCLOSED IS MY RENEWAL FEE OF Licensed Minister \$50.00 Dordained Minister \$75.00 \$_______enclosed to bring my monthly commitment up-to-date (if applicable) *\$______ Dorder You may use the Donate button on our website to take you to PayPal

Thank you for your time in this important matter. ICCAN is honored to have you as a member! You will be contacted by our office if additional information is needed. Otherwise you will receive your renewed credential card within 10-15 days from the time we receive your renewal in our office.

YOU CAN MAIL...FAX...OR EMAIL YOUR RENEWAL FORM ICCAN—INTERNATIONAL COWBOY CHURCH ALLIANCE NETWORK/FELLOWSHIP 2149 Hwy 139—Monroe, LA 71203 FAX: 1-318-345-0350 1-888-919-1717 Email: iccan@live.com WEB: www.iccantrail.com