



# Pentecostal / Charismatic Churches of North America

*"Demonstrating Unity in the Power of the Holy Spirit"*

**MEMBERSHIP APPLICATION**

## DENOMINATION / CHURCH NETWORK / ASSOCIATION / PARACHURCH MINISTRY

Date \_\_\_\_\_

Organization Name \_\_\_\_\_ Year Founded \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Office Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Senior Leader \_\_\_\_\_ Phone \_\_\_\_\_

Position/Title \_\_\_\_\_ Email \_\_\_\_\_

Executive Assistant \_\_\_\_\_ Primary Phone \_\_\_\_\_

Mobile Phone \_\_\_\_\_ Email \_\_\_\_\_

Who will represent the organization at the annual meeting? \_\_\_\_\_

Provide a brief history of the organization. See website \_\_\_\_\_ Sent separately (date) \_\_\_\_\_

If a denomination or network of churches is applying, please provide the following:

Number of domestic churches \_\_\_\_\_ Number of domestic credentialed ministers \_\_\_\_\_

If an association is applying, please provide the total membership in North America \_\_\_\_\_

Provide your organization's statement of faith. See website \_\_\_\_\_ Sent separately (date) \_\_\_\_\_

The above-named organization desires to become a member of PCCNA. Yes (date) \_\_\_\_\_

The organization's governing body accepts and agrees with PCCNA's statement of faith. Yes \_\_\_\_\_

The senior leader and governing body have reviewed the PCCNA bylaws ([www.pccna.org](http://www.pccna.org)) Yes \_\_\_\_\_

As a member of PCCNA, we would agree to be guided by their statement of faith, principles, purposes, and objectives as set forth in the PCCNA bylaws: Yes \_\_\_\_ No \_\_\_\_ We agree to the requested PCCNA annual membership financial contribution: Yes \_\_\_\_\_ No \_\_\_\_\_

*Parachurch Ministry—\$750; Denomination/Church Network/Association: small (2 to 999 churches)—\$750; mid-sized (1,000 to 2,499 churches)—\$1,500; large (more than 2,500 churches)—\$3,500*

See PCCNA website: [www.pccna.org](http://www.pccna.org), "About Us," "How to Join PCCNA"

Comments or Questions:

\_\_\_\_\_  
\_\_\_\_\_

Senior Leader Signature \_\_\_\_\_

**Mail or scan and email completed form (and brief history if not available online) to:**

Barbara Gray, Executive Director ■ P.O. Box 3986, Cleveland, TN 37320-3986 ■ [pentecostalcharismatic@gmail.com](mailto:pentecostalcharismatic@gmail.com)