



PO Box 3253  
Langley, BC V3A 4R6  
PH: (604) 539-2047  
FX: (604) 539-2043  
EM: [afcmcan@telus.net](mailto:afcmcan@telus.net)

## Annual Renewal Application

Please complete this form and submit along with your renewal fees payment by December 31<sup>st</sup>. The renewal form and fees must be sent together or your renewal will not be accepted. Married couples must complete separate forms. Every registrant submitting renewal fees after December 31<sup>st</sup> will be assessed a late fee of \$25.00. If we do not receive your renewal form and fees by January 31<sup>st</sup>, your registration with AFCM Canada will be cancelled for non-payment. AFCM reserves the right to cancel any licensing status if requirements set up by the Board of Directors are not met.

**\*\* Use only Adobe Reader to open and fill this form, otherwise your form may not submit or be fillable. \*\***

### Current Registration Status:

Last Name:

Church or Ministry Name:

First Name:

Preferred Name:

Spouse's Name:

Has the name of your church changed in the past year?

Home Address: (for Missionaries, please use a Canadian address)

Church/Ministry Address: (for Missionaries, please use a foreign address)

Are either of these addresses new?

To which address do you prefer mail to be sent?

If yes,

Church/Ministry Mailing Address: (if different from physical address)

Church website:

Office Phone:

Home Phone:

Fax:

Cell. No.

E-mail:

Other:

In what office of ministry are you currently involved?

\* Itinerants: Please select your area of ministry

Home Church:

Pastor:

If you are a Pastor, what is your average service attendance?

At this time, are you involved in full-time ministry\*\*?

Is your ministry the sole means of your support?

Have you been in contact with your Regional Director or the Canadian office this year?

Which AFCM meeting(s) did you attend this past year? (Check all that apply)

Western Region Overnighter, Banff, AB

Ontario Overnighter, London, ON

Eastern Region Overnighter, Sherbrooke, QC

AFCM Family Reunion, Willmar, MN

AB BBQ

MB, SK Campout

None

\*\* AFCM policy requires a licensee to be in full-time ministry. Full-time ministry is defined as someone who is ministering on a regular basis in a five-fold capacity. It does not necessarily mean that all of your income is derived from the ministry. If you have checked NO to the above question, or have checked the Transition box, please explain on a separate sheet.

Did you personally financially support AFCM this past year?

Are you an AFCM Family monthly Partner?

Did your church/ministry financially support AFCM this past year?

Does your church/ministry have Associate Church status with AFCM?

List other ministerial organizations you are licensed and/or ordained with:

Please give a brief summary of your ministry activities this past year including healings, salvations, etc. and special outreaches of your church or ministry:

Do you currently have:                      Children's program?  
    Youth program?  
    AFCM Bible School?

Do you have a policy regarding background checks on those working with youth and children in the church?

Are background checks run on all those who work with children and youth at the church?

If no, please note that beginning June 2001, it became mandatory for all AFCM Associated Churches to have background checks run on any individual working with the youth and children of the church. This information must be kept on file at all times.

What are your goals for the church this next year?

In what way(s) could AFCM assist you in the coming year?

Have you committed or been accused, questioned, or investigated for child abuse, child neglect or child molestation in the past year?

Have you committed or been accused, questioned or investigated for spousal abuse in the past year?

Have you used any form of tobacco products, alcohol (including wine), or illegal drugs in the past year?

Have you been convicted of a felony in the past year?

Have you been involved in homosexual activities in the past year?

Have you been involved in an extramarital relationship/affair in the past year?

Is there anything in your life that would hinder your ministry at this time?

If you have answered **Yes** to any of the above questions, please give an explanation including dates and details here:

In order for a person to assume a leadership role in the Christian ministry, we feel that the highest standards of personal conduct are expected. This includes managing a happy and healthy home life and abstinence from the use of tobacco, alcohol (including wine), or illegal drugs.

Understanding our position on the matter, please indicate your decision concerning our policy.

I understand that if AFCM is notified that I have violated the above-stated policy, it will be grounds for immediate dismissal.

Signature (Please Print Name)

Date

**Please read the following carefully and confirm with a check mark (✓) before signing.**

*I acknowledge that I agree with the Tenets of Faith and Ministerial Ethics set by the Association of Faith Churches and Ministries (Canada).*

*I hereby state my willingness to submit to the spiritual authority and guidelines of AFCM. If at any time I feel I can no longer agree with the beliefs and practices of this organization, or if it is requested by those in authority for any reason, I will forfeit and return my ministerial credentials (certificate and wallet card) to AFCM Canada.*

*I understand that it is a requirement for all AFCM associated churches, ministries, and organizations to conduct thorough background searches on all employees and volunteers who work in the children and/or youth departments. Failure to do so will be cause for dismissal from AFCM*

*I understand that AFCM Canada prepares an annual update on all licensees for AFCM International. This includes not only active licensees, but also those whose registrations have "Lapsed" due to non-renewal, those who have "Withdrawn" from or are "Dismissed" from AFCM during the course of the year. I understand that if my registration lapses, I withdraw or am dismissed from AFCM, my name will appear in the appropriate category in the next annual AFCM report.*

*I understand that as an active registrant of AFCM Canada, electronic communications may be received from time to time including updates, publications, meeting notifications, invitations to events, and other applicable announcements.*

*By signing this Annual Renewal Application, I agree with the conditions set forth in the paragraphs above and I hereby state that all the information contained on this Application is correct and true.*

Signature (Please Print Name)

Date

---

**RENEWAL FEES:** Married couples must complete separate forms and pay dues as stated below.  
This includes individual late fees as well.

**\$100.00**    **ORDINATION or LICENSING renewal for myself**  
**\$25.00**    Renewal for my SPOUSE (only if spouse is already registered with AFCM Canada)  
**\$75.00**    AFFILIATE ONLY renewal for myself (only if credentials are held with another ministry)  
**\$25.00**    Renewal is postmarked after December 31<sup>st</sup>. Enclosed is an additional \$25.00 late fee  
**\$**        **TOTAL**

Credit Card:    **VISA**    **MasterCard**

MM    YY

Card Number:

Expiration Date:

Name shown on card:

Signature:

(Please Print Name)

<b>For Office Use Only</b>	Approved	Declined
Comments:	Regional Director:	
Date	Governing Authority, AFCM Canada	