

Pentecostal Faith Assemblies, Inc.

2017 Form for Renewal of Credentials

I wish to renew credentials.

I do not wish to renew credentials.

Name: _____ Spouse: _____

Address: _____

Phone: _____ Cell: _____

E-mail: _____ S. S. Number: _____

Date of Birth: _____ Spouse's Date of Birth: _____

Name, address, and phone number of Church you are affiliated with:

What ministerial position are you functioning in at this time? _____

If you are not a pastor, what is the name and phone number of your pastor?

What credentials do you possess with PFAI? _____

In what way can PFAI better assist you in your ministry? _____

Do you agree to file Quarterly Reports, as stated in PFAI Constitution and By Laws, to Bishop Scottie Jackson, PFAI, P O Box 84, Colonial Beach, VA 22443? Yes _____ No _____

Do you agree to pay monthly dues to PFAI in the amount of \$25 (\$35 per married couple) sent to PFAI, P O Box 84, Colonial Beach, VA 22443? Yes _____ No _____

Signature

Date

Please complete and mail this form to: Bishop Scottie Jackson, PFAI, P O Box 84, Colonial Beach, VA 22443 by March 31, 2017. If not received by March 31, 2017, your credentials with PFAI are no longer valid. Use of credentials without renewal is illegal and unethical. A \$100 re-application fee applies for lapsed credentials.