

MESSENGER FELLOWSHIP - Application for Association

Office Use Only

Date Application Received ____/____/____
Application Fee Received ____
References 1 2 3
Application is Complete ____/____/____
Application Data Entered Approved

Please attach a recent passport style, color photo in this box or email a photo to admin@messengerfellowship.com
Please type or print clearly with dark ink

Read through the entire application before beginning. If you need additional information on Messenger Fellowship please go to www.messengerfellowship.com. Some of the questions are of a confidential nature but are necessary for the integrity of our association and to better serve you in future ministry opportunities. Please note that original signatures are required. Association is open to men and women ages eighteen and older in leadership roles in the church, the mission field, or the marketplace.

Personal Information

Title ____ First Name _____ Middle _____ Last Name _____

Preferred First Name _____ Home Address _____

City _____ State _____ Zip _____ Country _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email _____ Spouse Email _____ Website _____

Fax _____ Email _____ Birth Date _____ Male Female

Are you a U.S. citizen? _____ If not, what is your country of citizenship? _____

Your current marital status? Single, never married Married Separated Divorced Remarried Widowed

Anniversary _____ Spouse's Name _____ Spouse's Birth Date _____

Further information on your marriage? _____

Children's names and birth dates _____

What is your primary language? _____ What other languages do you speak? _____

What degrees have you earned? High School Diploma Associates Degree Bachelors Masters Doctorate

When did you graduate with your last degree? _____ What is your last degree in? _____

What school(s) did you attend _____

Christian History

When did you become a Christian? _____ Describe your church heritage and background _____

What are your spiritual gifts? _____

What are some of your natural abilities and acquired skills? _____

What kind of discipleship and training have you had? _____

Have you been on or led a missions outreach? If so, where? _____

Ministry History

Are you currently involved in ministry? Full-time Part-time Not currently Years in ministry? _____

Name of Home Church _____

Name of Current Ministry (if different than Church) _____

Ministry Address _____ City _____ State _____

Zip Code _____ Phone _____ Country _____

Website Address _____ Email _____

Your Present Position _____ How long in this position? _____

Briefly describe your current ministry _____

Summarize your life's vision and message _____

Messenger Information

Why are you applying to become a Messenger Associate? _____

What groups, denominations and leader fellowships have you been associated with in the past? _____

Are you currently associated with any denominations or leader fellowships? If so, with whom and for how long?

Are you currently licensed/ordained? _____ If so, with whom and for how long? _____

If applying for ordination through Messenger, please fill out an Application for Ordination.

How did you hear about Messenger Fellowship? _____

The application review committee gives tremendous weight to each applicant's personal references when considering them for association. We must have a minimum of three personal references on file *before* this application can be approved. References should be from *one active full-time minister, one personal friend and one other person*. At least **one** must be a current Messenger Associate. Please list below the information of the three people from whom we will be receiving your references. ***Fill out the top portion of each form with your personal information, and give the form to the people that you have listed below; ask them to return it to our offices as soon as possible. DO NOT ask them to give the reference form back to you for mailing. Be sure to sign the liability release line before you give it to them.*** You may wish to inform them that your application will be *pending* until we have received their signed form. Approvals will be processed within 60 days of receiving your *completed* application.

Reference #1

Name _____ Phone _____ Relationship _____

Reference #2

Name _____ Phone _____ Relationship _____

Reference #3

Name _____ Phone _____ Relationship _____

Do you have any final comments or information that you want us to know as we consider your application? _____

I understand that my application for association with Messenger Fellowship is subject to approval by a review committee and must be renewed on an annual basis. I also understand that this is an association that is built upon the integrity of healthy and honest relationships. Therefore, I affirm that all of the information in this application is, to the best of my knowledge, true in all respects. I additionally affirm awareness of and compliance with points listed below under "More Information." I am aware that my association will be reviewed each year and may be revoked at any time with the appropriate refund of my current yearly dues. If my association is revoked for any reason, I understand that I may file an appeal with the Board of Governors. I agree that the decision of the Board of Governors is binding, and I will pursue no additional recourse. I further agree to release Messenger Fellowship, Inc., its officers, directors or council members from any and all liability or litigation in regards to my association with them. In addition to confirming my agreement with the terms of this application and attesting that it is truthfully submitted, my signature below hereby indemnifies them against any and all future litigation.

Date _____ Signature of Applicant _____

Messenger Fellowship does not discriminate against any applicant on the basis of gender, disability or ethnicity.

Thank you for your application. We look forward to being connected with you in a leadership community. We suggest that you keep a copy of this application for your files and for future reference.

Please review your application for accuracy, **and confirm that you have done the following:**

- Attached or emailed a recent passport style, color photo in the box on the front of the application.
- Signed the application.
- Given the personal reference form to three people.
- Included a check made *payable to Messenger Fellowship* or a PayPal payment for the appropriate annual fee(s)
 - o **\$125 Association**
 - o **\$290 Ordination (\$125 Association; \$165 Licensure/Ordination)**
 - o **For Missionaries, dues are half price**
- o We will promptly offer a refund if your application is *not* approved.

Send your application along with the required items to:
Messenger Fellowship PO Box 681981, Franklin, TN 37068*1981

For assistance, please contact us at: **615-905-6743**

Email: **admin@messengerfellowship.com**

http://www.messengerfellowship.com

Approvals will be processed within 60 days of receiving your completed application.

Once approved we will notify you and you will be given immediate access to the *Login* section on the website.

More Information

- Associates commit to participate in at least one Messenger related event a year.
- As you become a Messenger Associate, it may be required that you complete certain Leadership Training within your first year.
- The values that we affirm are summarized on our website at *www.messengerfellowship.com*.
- The doctrinal positions that we affirm are included in the Apostle's Creed, Nicene Creed and the Lausanne Statement of Faith.

MESSENGER FELLOWSHIP – **Application for Ordination***

A completed *Application for Association* must be on file or enclosed with this application together with your Association dues (\$125) and Ordination dues (\$165) for a total of \$290 annually in order to apply for ordination.

(New associates applying for first time association can only fill out this additional application for ordination if they have the personal recommendation of a Senior Messenger Leader.)

Approvals will be processed within 60 days of receiving your completed application.

I am currently a Messenger Associate: Yes No Currently Applying

I am applying for: Ordination with Messenger Fellowship Ordination Renewal

Are you a missionary? Yes No If yes, Where/To Whom: _____

I understand that upon acceptance and approval of this application, a Ministerial License will be granted. This is subject to the oversight of the leadership of Messenger Fellowship and must be renewed on an annual basis. I have committed myself to the call of God on my life for ministry. Through the Spirit's enablement, I will place my personal relationship with God and my growth into His image above my ministry. I will seek to minister with a servant's heart, endeavoring to build the Kingdom of God. To do this, I will live according to the ethical code of the Bible, embracing open relationships, financial integrity, doctrinal truth and cooperation in ministry projects. I choose to enter into mutually accountable relationships with others. I give them permission to speak into my life, my family, my ministry and my relationship with God. I invite them to encourage my personal growth, and I commit myself to be a prayerful and truthful encouragement and guide to them. I will

I understand that my annual license renewal will be contingent upon my ministry expression staying within the parameters as submitted in my application and that any changes included herein will be reviewed by the leadership of Messenger Fellowship.

I will continue to live according to the scriptural mandates of a minister of the Lord and will continue to walk in unity with the Associates of Messenger Fellowship. I will continue to submit to the advice and correction of the leadership of Messenger Fellowship.

I have read fully this agreement and understand my responsibility to represent the character and values of Messenger Fellowship, and will endeavor to annually attend a Messenger event.

Applicant Signature

Date

This application is hereby accepted this _____ day of _____, 201__.

President
Messenger Fellowship

Executive Director of Operations
Messenger Fellowship

**** Please note that first-time ordination applicants must have a minimum of two years experience in full-time ministry. If you do not currently meet this qualification you will be issued a license to practice ministry until the two year minimum requirement is met.***

MESSENGER FELLOWSHIP – Personal Reference Form

Note to reference giver: The person whose information is written below is applying with Messenger Fellowship, an international association of Christian leaders. They have selected you as one of their personal references. Messenger Fellowship gives serious consideration to the personal references that it receives on each applicant.

The information that you give is a vital part of our ability to ensure the integrity of our association. Please be very candid in your response to these questions.

Our organization is built upon core values and the acceptance that every individual has many virtues and imperfections.

We are not looking for, nor expecting, a reference that is without honest evaluation. Your responses will be kept in strict confidentiality.

Please be sure that the applicant has filled in their portion below, complete with *signature and date*. After signing, mail it to the address printed at the bottom of this form.

Please be aware that the applicant's status will be *pending* until we have this personal reference form on file. Thank you.

Duplicate this form as needed. Do not give this response form back to the applicant.

Applicant's Name _____ Phone _____ Email _____
Address _____ City _____ State _____ Zip _____
<i>I release the person named below from all liability regarding this questionnaire.</i>
Signed by Applicant _____ Date _____

Please type or print clearly with dark ink.

Your Name _____ Phone _____ Email _____

Address _____ City _____ State _____ Zip _____

Country _____ Your Profession _____

Please describe your relationship to the applicant. _____

How long have you known the applicant? _____ How well do you know their spouse and children (if any)? _____

How would you describe the health of their marriage and family? _____

Please describe the applicant's most significant ministry gifts and their greatest leadership traits.

What are the greatest achievements, that you are aware of, of the applicant? _____

What have been the greatest struggles that you have observed the applicant go through? _____

How did they handle themselves during this time of difficulty? _____

Please describe, in your opinion, the applicant's greatest strengths. _____

Please describe, in your opinion, the applicant's greatest weaknesses. _____

Are there any roles in which you would be concerned about the applicant functioning? _____

Is there anything about the applicant that you think a leadership association should know? _____

Do you have any final comments? _____

Thank you for your assistance.

Date _____ **Signature** (by person giving recommendation) _____

Send to: Messenger Fellowship • PO Box 1981, Franklin, TN 37068-1981
admin@messengerfellowship.com • Fax 615-905-6743