

**Immanuel Ecumenical Council  
of Churches Apostolic International, Inc.**

Headquartered @ Immanuel House of Prayer 147 E. Grand Blvd Detroit, MI 48207  
Prelate Bishop Thomas L. Johnson Sr., DD Presiding

**CHURCH MEMBERSHIP APPLICATION**

Please type or legibly handwrite. If a question does not apply, type or print "N/A". Return to:  
Immanuel Ecumenical Council of Churches Apostolic International, Inc. 147 E. Grand Blvd Detroit, MI 48207

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Official Name of Church, Ministry or Organization

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Street Address

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City

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State

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Zip

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Website Address: \_\_\_\_\_

Are you the pastor?     Yes     No

If No, please explain \_\_\_\_\_

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When was your church formed? \_\_\_\_\_

How many members attend the church? \_\_\_\_\_

How long have you pastored this church? \_\_\_\_\_

If less than one year, list the name of the church you formerly attended, including pastor's name, address and phone number.  
Also list how long you attended and your reason for leaving.

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Do you have any denominational affiliation?     Yes     No    If Yes, please explain

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Previous organizational affiliations

Is your organization incorporated?  Yes  No

If Yes, in what state? \_\_\_\_\_

Is your organization 501c3 tax-exempt?  Yes  No

Why do you desire affiliation with Immanuel Ecumenical Council of Churches? (Please use an additional sheet of paper if necessary)

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What are your expectations of the Immanuel Ecumenical Council of Churches Apostolic International Inc.?

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Will you cooperate with other Immanuel Ecumenical Council of Churches organizations and members?  Yes  No

What are your short-term goals or projections?

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What are your long-term goals or projections?

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Have you been properly trained in Pastoral Care?  Yes  No

Are you willing to take further classes?  Yes  No

Do you feel comfortable with your staff?  Yes  No

Will you encourage them to enroll in IEC Ministerial/Leadership Training classes?  Yes  No

Does your church have an Evangelistic or Outreach Program in place  Yes  No

If No, why not?

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Describe your church's rapport with the community

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# MINISTRY INVOLVEMENT

Date you were saved: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date you were baptized by immersion: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date you were baptized with the Holy Spirit with evidence of speaking in tongues : \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Were you raised in a Christian home?       Yes     No

Are you currently involved in full time ministry?       Yes     No    If yes, how many years? \_\_\_\_\_

To which of the five-fold ministry gifts do you believe you are called?

Apostle     Prophet     Evangelist     Pastor     Teacher

Do you smoke or drink alcohol?       Yes     No

Have you ever been convicted of a crime?       Yes     No

If Yes, please explain

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Are you presently or have you ever been licensed or ordained?       Yes       No

If so, please list the denomination/organization and date credentialed. (Please attach a copy of credentials)

Have you previously submitted an application to Immanuel Ecumenical Council Of Churches?       Yes       No

If Yes, when? \_\_\_\_\_

# STATEMENT OF INTENTION

I, the undersigned, officially designated representative of this ministry, do hereby apply for membership in Immanuel Ecumenical Council of Churches Apostolic International, Inc. (IECCAI). In placing this application, we give assurance that the DOCTRINE of our church/ministry is consistent with the CHRISTIAN Faith as outlined in the Holy Scriptures (Authorized King James Version of 1611).

I understand that all items submitted to IECCAI as part of the application process becomes the permanent property of IECCAI and will not be returned.

This application will be held in confidence. Only those persons with a need to know will review it. I grant IECCAI and its leadership permission to verify the information provided on this application and all membership requirements.

I hereby state that all the information contained in this application and all correspondence with IECCAI is correct and true. If IECCAI is notified that any of the information is false, it will be grounds for immediate cancellation of the application procedure and/or revocation.

The enclosed Pastoral application fee of \$120.00 is submitted as evidence of our church's commitment to the Fellowship.

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Signature

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Date