



**Partner/Membership Application Form**

▼ PLEASE HAND THIS COMPLETED APPLICATION TO THE CHAPTER PRESIDENT ▼

CHAPTER:	No:	HOME PHONE: ( )
SURNAME:	CHRISTIAN:	WORK PHONE: ( )
STREET:		MOBILE:
CITY:	PC:	FAX: ( )
OCCUPATION:	DOB: / /19	DENOMINATION:
CHURCH ACTIVITY:	WIFE'S NAME:	
EMAIL:	SPONSOR:	

▼ Please Tick

Record your contribution ▼

**MONTHLY PAYMENT OPTION** (includes yearly membership fees)

<input type="checkbox"/>	Bronze Partner	\$15 to \$49 per month	\$
<input type="checkbox"/>	Silver Partner	\$50 to \$99 per month	\$
<input type="checkbox"/>	Gold Partner	\$100 and over per month	\$

**MONTHLY PAYMENT METHOD** Please Tick ►

<input type="checkbox"/> CHEQUE/MONEY ORDER (see note 1 below)	<input type="checkbox"/> INTERNET (Contact National Office)	<input type="checkbox"/> CREDIT CARD (see note 2 and complete credit card details below)
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NOTES: Monthly Partner contribution made by:

- Cheque – Please attach your first monthly Cheque/Money Order. We will send forms for ongoing monthly contributions.
- Credit Card – Contributions will be processed by National Office before the 7<sup>th</sup> Monthly.

**YEARLY PAYMENT OPTION** (includes yearly membership fees)

<input type="checkbox"/>	Member	\$120	\$
<input type="checkbox"/>	Bronze Partner	\$180 to \$599	\$
<input type="checkbox"/>	Silver Partner	\$600 to \$1,199	\$
<input type="checkbox"/>	Gold Partner	\$1,200 and above	\$
<input type="checkbox"/>	Member (Pensioner concession)	\$66. minimum per year	\$
<input type="checkbox"/>	Donation		\$

▼ Complete PAYMENT DETAILS section

**PAYMENT DETAILS**

<input type="checkbox"/>	Cheque / Money Order attached (make payable to FGBMFI Ltd)
<input type="checkbox"/>	Internet: PLEASE CONTACT NATIONAL OFFICE
<input type="checkbox"/>	Credit Card
<input type="checkbox"/>	VISA
<input type="checkbox"/>	MASTERCARD
<input type="checkbox"/>	BANKCARD

NAME ON CARD: \_\_\_\_\_ EXPIRY DATE: [ ] [ ] - [ ] [ ]

CARD NUMBER [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ]

CARDHOLDER'S SIGNATURE: \_\_\_\_\_

**MONTHLY CREDIT CARD PARTNER'S AUTHORISATION:**

I hereby give Full Gospel Business Men's Fellowship International permission to debit my credit card each month with the Partnership donation designated above. I understand that this authorisation will remain in effect until I contact Full Gospel Business Men's Fellowship International asking them to change or end this agreement. I also understand that giving to the Partnership Program is completely voluntary and I may change or end my participation at any time.

I agree with the Doctrinal Statement on the reverse of this form and apply for Membership/Partnership of Full Gospel Business Men's Fellowship International Ltd in the Chapter designated above:

APPLICANTS SIGNATURE:	Date:	CHAPTER APPROVAL SIGNATURE:	DATE:
		TITLE:	