



APEPT INTERNATIONAL

Charter Church Application

Date of Application: _____

Is this a: _____ First time application _____ Renewal of Church Charter

Church Information

Church Name: _____

Address 1: _____ Address 2: _____

City: _____ State: _____ Zip Code: _____

E-Mail Address: _____ Church Phone: (____) ____ - _____

Pastor Name: _____

Is your church Incorporated? _____ Yes _____ No If yes, what state? _____

What is your Employer Identification Number? _____ - _____

Leadership Information

President

Address 1: _____ Address 2: _____

City: _____ State: _____ Zip Code: _____

E-Mail Address: _____ Contact Phone: (____) ____ - _____

Treasurer

Address 1: _____ Address 2: _____

City: _____ State: _____ Zip Code: _____

E-Mail Address: _____ Contact Phone: (____) _____ - _____

Church Statistics

Church Membership: _____ Attendance Sunday Morning: _____
(Average)

Questioner

- 1) Do you agree with the Tenants of Faith of APEPT International Inc.? ____Yes ____No
- 2) Do you require all of your children's ministry volunteers to undergo a thorough background check?
____Yes ____No

A) If yes, please explain: _____

- 3) Are your church finances in order? ____Yes ____No

Statement of Support

- 1) Are you in harmony with and willing to submit to this certifying body? ____Yes ____No
- 2) Are you applying to use our 501(c)3 status: ____Yes ____No ____We have our own

Check Number: _____
(Internal Use Only)