



# APOSTOLIC FAITH FELLOWSHIP

[www.apostolicfaithfellowship.org](http://www.apostolicfaithfellowship.org)

## Ladies Ministry Certificate Application

Applicant Full Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Marital Status \_\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Name Of Church You Attend \_\_\_\_\_

Church Address \_\_\_\_\_

Spouse Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Number of Children \_\_\_\_\_

1. Is Your Husband A License AFF Minister? \_\_\_\_\_
2. License Applied For:
  - a. Ladies Ministry Certificate \_\_\_\_ \$100 per year or \$30 per quarter. Requirement for Ladies Ministry Certificate; Must be a lady that is 18 years of age, have read the Bible through, have read the AFF Ladies Ministry reading List.
3. What Are You Doing In Your Church? \_\_\_\_\_
4. Are You Willing To Help Raise Money For The AFF Ladies Ministries Department? \_\_\_\_\_
5. Do You Hold A Secular Job? \_\_\_\_\_
6. Do You Have Minor Children Living At Home? \_\_\_\_\_
7. Have You Or Your Spouse Ever Been Divorced? \_\_\_\_ If So, Please Attach A Letter With The Details.
8. Are You Living Common Law With A Person To Whom You Are Not Legally Married? \_\_\_\_\_
9. Have You Ever Been Dropped Or Left Under Question From An Apostolic Ministers Group? \_\_\_\_ If So, Please Attach A Letter With The Details.
10. Have You Ever Been Convicted of, Pled Guilty To, Child Abuse Or A Crime Against A Child Involving Actual Or Attempted Sexual Molestation? \_\_\_\_\_
11. Are You A Registered Sex Offender? \_\_\_\_\_
12. Do You Engage In Any Of The Following?
  - A. Alcohol Consumption? \_\_\_\_\_
  - B. Use Of Tobacco? \_\_\_\_\_
  - C. Non Prescription Drug Use? \_\_\_\_\_

D. Pornography? \_\_\_\_\_

13. Do You Believe The Second Coming of Jesus has already occurred (The Rapture) And We Are Currently Living In The Millennium? \_\_\_\_\_

14. Do You Believe That Satan Is Bound Right Now? \_\_\_\_\_

15. Do You Believe The Following Essential Doctrines?

A. The Oneness Of God? \_\_\_\_\_

B. It Is Essential to Repent, Be Baptized In Jesus Name, And Receive The Infilling Of The Holy Ghost With The Evidence Of Speaking In Other Tongues In Order To Be Born Again? \_\_\_\_\_

C. Holiness In Lifestyle And Separation From The World? \_\_\_\_\_

16. Were You Immersed In Water In The Name Of Jesus Christ For The Remission Of Sins? \_\_\_\_\_

17. Did You Receive The Holy Ghost With The Evidence Of Speaking In Other Tongues? \_\_\_\_\_

18. Do You Believe In The Eternal Punishment For The Unsaved Dead? \_\_\_\_\_

19. Do You Believe That Jesus Was Fully God And Fully Man, The Man Being The Son Of Mary? \_\_\_\_\_

20. Do You Believe That Homosexuality Is A Sin? \_\_\_\_\_

21. Do You Believe That A Marriage Is Defined As One Man and Woman? \_\_\_\_\_

22. Please Describe Briefly Why You Desire Membership In The Apostolic Faith Fellowship?

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23. If You Are Not Under A Pastor's Direct Ministry, You Must Have A Three Person Accountability Group, One Of Which Must Be A License AFF Minister. Please List Name, Address, Cell Number and Email Address For Each;

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

24. Your Pastor's Name and Cell Phone Number \_\_\_\_\_

25. If You Are Working Under A Pastor And Seeking Membership In The AFF, It is Recommended To Have Your Pastor's Signed Approval;

Pastor's Signature \_\_\_\_\_

Printed Pastor's Name And Date \_\_\_\_\_

26. Do You Or Your Spouse Currently Hold Ministerial License With Any Other Fellowship or Organization? \_\_\_\_\_

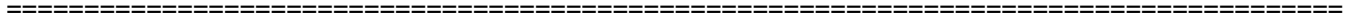
If So Please List \_\_\_\_\_

Husband's Signature \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Printed Name \_\_\_\_\_

Please Submit To Your District



Please Do Not Write Below This Line - AFF District Use Only

Name Of District \_\_\_\_\_

Approved By:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

Date Of Approval \_\_\_\_/\_\_\_\_/\_\_\_\_

Amount Received \$ \_\_\_\_\_

Please Send Original To: Ron Pickard, HC 61 Box 5, Boswell, OK 74727

Please Email Copy or Photo To: akers@apostolicfaithfellowship.org