



THE ASSOCIATION FOR EDUCATION AND EVANGELISM  
300 Water St., Whitby, On L1N 9B6  
Phone: 416-391-5000 Fax: 416-391-3969  
info@canadachristiancollege.com

**For Office Use Only**

Date Received:  
Method of Payment:  
**Money Order**   
**Cheque**  **Cash**   
**Visa**  **Master**

## *Credential Renewal Application 20YY*

Your current credentials expire **December 31**. To renew your credentials, please answer all questions. Requirements to maintain active standing are outlined in the Ministers handbook. Any questions you have should be direct to the E.A. office.

<p><b>Name:</b> _____</p> <p><b>Address (New? <input type="checkbox"/>):</b> _____</p> <p><b>City:</b> _____ <b>Province:</b> _____ <b>Postal Code:</b> _____</p> <p><b>Home Phone:</b> _____ <b>Bus/Cell Phone:</b> _____</p> <p><b>E-mail Address:</b> _____</p>
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### **A. Ministry update information:**

*Your answers will NOT affect your standing (for our file updating only)*

1. Indicate your area of ministry: Local Church  Itinerate Ministry  Bible College  Other

2. What other organization if any, do you have credentials with: \_\_\_\_\_

3. Do you serve on a local church pastoral staff: Yes  No  if **yes**, give name and address of church:

Church Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

4. Indicate the title or position which best describes your ministry:

Sr. Pastor  Assist/Assoc. Pastor  Christian Ed. Director  Youth  Music  Visitation  Administration

Other (specify) \_\_\_\_\_

Total Number of people attending for Sunday School: \_\_\_\_\_ Morning Service: \_\_\_\_\_ Evening Service: \_\_\_\_\_

5. If you are an **Ordained** minister engaged as a Senior Pastor, Assistant (Associate) Pastor, or an Evangelist, did you preach a minimum of 25 times in the last year? Yes  No

6. What is your Marriage No: \_\_\_\_\_  
 How many weddings did you officiate during the last year: \_\_\_\_\_ How many funerals: \_\_\_\_\_

7. If you are a **Licensed** Minister or Evangelist and are engaged in pastoral or evangelistic work, did you preach a minimum of 20 times in the past year: Yes  No

**B. Credential Fee**

For applications received or postmarked by *January 31*, the lower fee applies.

**Option # 1: Remittance must accompany this form (Cheque, Money Order thru Mail or Walk in) (Cash- Walk in ONLY)**

Schedule of Fees	Please Mark Your Designation		Senior (70 yrs. and older): YES / NO	
	Before Jan. 31	After Jan. 31	Before Jan. 31	After Jan. 31
<input type="checkbox"/> Ordained Pastor	\$200.00	\$300.00	<input type="checkbox"/> Licensed Pastor	\$200.00 \$300.00
<input type="checkbox"/> Ordained Evangelist	\$200.00	\$300.00	<input type="checkbox"/> Licensed Evangelist	\$200.00 \$300.00
<input type="checkbox"/> Ordained Worship Pastor	\$200.00	\$300.00	<input type="checkbox"/> Licensed Worship Pastor	\$200.00 \$300.00
<input type="checkbox"/> Ordained Missionary	\$200.00	\$300.00	<input type="checkbox"/> Licensed Missionary	\$200.00 \$300.00
			<input type="checkbox"/> Lay Pastor/Evangelist/ Worship Pastor	\$200.00 \$300.00

**SENIOR'S DISCOUNT** \* Please be advised that we can no longer grant credentials free of cost to those age 70 years and older; due to the increased cost of operation.  
**(The rate for those over 70 years will be required to pay 60% of the regular fee.) \$ \_\_\_\_\_**

**Option # 2:**  
 Name on the Card: \_\_\_\_\_  
 Card No: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**NOTE:**

- (a) Those who do not renew their credentials before the end of February, *Your Credential Will No Longer be Valid!* You will be required to re-apply for credential status.
- (b) Members with Marriage No. acquired though EA are *required to renew membership annually* to retain their number.
- (c) All credential holders are *required to attend* at least One E.A. conference per year if resident of Ontario.
- (d) Kindly *update the office* for any changes (add, phone no, email, etc.).
- (e) *Online application* is also available: <http://www.evangelicalassociation.ca>
- (f) Cheque payable to **The Association For Education and Evangelism.**

**OBSERVE: NO MEMBER OF E.A. SHALL BE INVOLVED OR PERFORM SAME SEX MARRIAGES**

I certify that all information on this form is accurate.

Signed \_\_\_\_\_ Date \_\_\_\_\_