

LIFE RECOVERY

Christian Prisoner Ministry
 36 Research Park Ct • Weldon Spring, MO 63304
 Phone (636) 229-7900
 cpm@upci.org

Application

For ~~Šă^Ů^&ç^i^Ō^|cãBca }~~
 REVISED 6/10/07

NOTE:

This is a two page (or two-sided) form. Both pages must be completed in order for application to be processed. Other items which must be included are listed on second page (back side).

For Office Use Only

PLEASE DO NOT WRITE IN THIS SPACE

- Account Number _____
- Code Entered _____
- Payment _____
- Photo _____
- Training _____
- Certificate of completion _____
- UPCI Pastor's Signature _____
- Date badge sent: _____

Notes: _____

Personal Information:			
Name:			
Address:			
City:	State:	Zip:	
Email:	Phone:		
Age:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Preferred Contact Method:	
Are you a licensed minister with the UPCI?: <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes: <input type="checkbox"/> Local <input type="checkbox"/> General <input type="checkbox"/> Ordained	
Church Information:			
Church Name:			
Pastor's Name:		How long have you been a member?	
Address:			
City:	State:	Zip:	
Phone:	Fax:		

More Personal Information:

Have you been baptized in water by immersion in the name of Jesus Christ for the remissions of sins according to Acts 2:38?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you believe that speaking with other tongues as the Spirit gives utterance is the initial sign of the baptism of the Holy Ghost, as according to Acts 2:4?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you received this experience?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you believe in preaching and teaching this experience?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are presently active in the Church of Christ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you fully understand that the Church of Christ does not give you ministerial credentials with the UPCI, and that the license is valid only while ministering in the Church of Christ of your area?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> <input type="checkbox"/>

THE FOLLOWING IS A POLICY REQUIREMENT:

In order to have your application processed, you **MUST** have your pastor's signature below and he **MUST** have credentials with the UPCI. YES, credentials with the UPCI

Pastor's Signature:	Date:
Applicant's Signature:	Date:
Trainer/Location of Training:	Date:

What To Send and Where To Send It:

Please submit the following:	To this address:
<ul style="list-style-type: none"> • This Church of Christ Application Form. • A copy of your SU training certificate of completion provided from Ministry Central. • A current photograph of yourself. • For a one-year license, please remit \$35 with this application. You may purchase a two-year license for \$55. This non-refundable fee for your License Fee needs to be made payable to Christian Prisoner Ministry <p>NOTE: If application components are emailed, payment must be received prior to processing. Call-in payments accepted.</p>	<p align="center">CPM Department 36 Research Park Ct Weldon Spring, MO 63304 cpm@upci.org</p> <p align="center">If you need to reach us quickly, please call, fax or e-mail us: Phone: (636) 229-7900 cpm@upci.org</p>