



If membership at your current church is less than 3 years, provide the following information regarding church membership for the last 6 years. (Use a separate sheet of paper if more space is needed.)

| Church | Address | City,State | Dates Began/Left | Reason |
|--------|---------|------------|------------------|--------|
| _____  | _____   | _____      | _____            | _____  |
| _____  | _____   | _____      | _____            | _____  |
| _____  | _____   | _____      | _____            | _____  |

Give names and contact method (email, phone, etc.) of two evangelical leaders we may contact for personal references or the name of an active EMNR member recommending you:

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

By my signature below, I affirm that I have read, agree to, and will abide by the doctrinal statement in the Lausanne Covenant and governing principles set forth in EMNR’s *Manual of Ethical and Doctrinal Standards*. (If applying as a ministry, this signature includes all named staff members.)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Annual Membership Fee:

- \_\_\_\_\_ \$25 Individual
- \_\_\_\_\_ \$35 Small Ministry (1 to 4 Staff Members)
- \_\_\_\_\_ \$50 Large Ministry (5 or more Staff Members)

The Membership term from January 1 to December 31 of each year. Membership entitles you, your spouse, and listed ministry staff members to a discount for EMNR conferences, and the right to use the EMNR member logo on your web site and literature. Membership renewals are normally requested the last quarter of each year. If you cannot afford the annual membership dues, send us whatever you can afford with a very brief letter of explanation, and we’ll cover the rest.

If applying as an individual, please **discard** pages 4, 5, and 6.

If applying as a ministry or corporation, please complete the rest of this document.

Return the completed application form with a check or money order payable to “EMNR”, along with page 3, to this address:

EMNR  
PO Box 600998  
Jacksonville, FL 32260-0998

## Data to be published in the Members page

The EMNR web site lists current member names and data at <https://emnr.org/members/>

When you join EMNR, you may publish data about your ministry. More data is visible for Corporate Members (ministries, organizations) than for Individual members.

### Corporate members

For Corporate members, we list the ministry name, names of directors (president, founder, leader, etc.), and a general vicinity of the city and state, and one or more contact methods. Listing just the web site may be sufficient, but we can also list a Facebook page, a YouTube channel, a Twitter account, a phone number, or something else. We can list the topics you focus on (e.g., Seventh-day Adventism).

***The following data will be visible to the world, including both Google web spiders (good) and email or data harvesting bots (bad), so complete this section only if you are willing to have it listed. Send it back with your Membership Renewal form.***

Ministry Name or abbreviated name: \_\_\_\_\_

Web site (linked to the ministry name): \_\_\_\_\_

Name(s) and title of director, etc.: \_\_\_\_\_

City, state (we recommend giving the nearest “big city”): \_\_\_\_\_

Other web site (Facebook, YouTube, etc.): \_\_\_\_\_

Other web site or contact method: \_\_\_\_\_

Focus topics, if desired: \_\_\_\_\_

### Individual members

For individual members, we print your name only, but if you want something more to be added, list it here. Members do not have to be listed at all. If this is you, write “please do not list” below.

Preferred spelling of your name: \_\_\_\_\_

Other info (or “do not list”): \_\_\_\_\_

# Application for Ministries and Organizations

Legal Ministry name: \_\_\_\_\_

Abbreviated name, if any (e.g., "EMNR"): \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone(s): \_\_\_\_\_ Email: \_\_\_\_\_

**Internet sites:**

Web site 1: \_\_\_\_\_

Web site 2: \_\_\_\_\_

Facebook: \_\_\_\_\_

YouTube: \_\_\_\_\_

Twitter: \_\_\_\_\_

Other: \_\_\_\_\_

Note: Being unincorporated will not prevent you from joining EMNR as a ministry or organization.

Is this ministry incorporated?  Yes  No If yes, complete the next line

Date incorporated: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_ Are you a Non-profit?  Yes  No

Provide names, mailing address and contact data for all ministry staff (paid or volunteer) who should be included as EMNR members. You may list a PO Box for the mailing address. Note that 5 or more staff is a "Large Ministry" for EMNR. If your ministry has chapters in other locations, list the chapters here. The person listed at the top of page 1 of this form should also be entry #1 in the list below.

|    | Name  | Address | City/State/Zip | Phone | Email | Years with this org? |
|----|-------|---------|----------------|-------|-------|----------------------|
| 1. | _____ | _____   | _____          | _____ | _____ | _____                |
| 2. | _____ | _____   | _____          | _____ | _____ | _____                |
| 3. | _____ | _____   | _____          | _____ | _____ | _____                |
| 4. | _____ | _____   | _____          | _____ | _____ | _____                |
| 5. | _____ | _____   | _____          | _____ | _____ | _____                |
| 6. | _____ | _____   | _____          | _____ | _____ | _____                |
| 7. | _____ | _____   | _____          | _____ | _____ | _____                |
| 8. | _____ | _____   | _____          | _____ | _____ | _____                |

Additional offices/persons to receive EMNR correspondence. They will not be counted as staff.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Please provide the following information about your Board Members (Board of Directors), who provide governance for your organization. They will not be counted as staff. Do not list a board of reference. If insufficient space, please attach an additional piece of paper.

| <b>Name</b> | <b>Address</b> | <b>City/State/Zip</b> | <b>Phone</b> | <b>Email</b> |
|-------------|----------------|-----------------------|--------------|--------------|
| 1.          | _____          | _____                 | _____        | _____        |
| 2.          | _____          | _____                 | _____        | _____        |
| 3.          | _____          | _____                 | _____        | _____        |
| 4.          | _____          | _____                 | _____        | _____        |
| 5.          | _____          | _____                 | _____        | _____        |
| 6.          | _____          | _____                 | _____        | _____        |
| 7.          | _____          | _____                 | _____        | _____        |
| 8.          | _____          | _____                 | _____        | _____        |

Explain the nature of your organization's ministry to new religions and cults: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List books, articles, pamphlets, tracts, etc., you have authored in relation to the purposes of EMNR. Include publisher, date, and pages:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List courses, seminars and/or workshops you teach or have taught related to the purposes of EMNR. Provide conference and/or school names, dates, and approximate size of classes. If online recordings exist, please provide URLs or web links where they may be found:

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If requested, is your ministry willing to submit a financial statement to EMNR?  Yes  No

Use additional paper, if necessary, to complete any responses to the preceding inquiries.

Also include any additional information on your ministry you believe pertinent, such as: Statement of Faith, literature about your organization's history, purposes and goals, samples of your newsletter, resource literature, or catalog of materials you distribute, etc. If this includes books, we would *truly* appreciate a copy, but it's not required to send books for review.

If anything in this application form is unclear or if you need guidance at any stage, please contact our Executive Director, Eric Pement, by phone or email:

email: [eric@emnr.org](mailto:eric@emnr.org)  
phone: (904) 469-7579

This phone number can also accept text messages and voice mail.