



**GLOBAL MISSION PARTNERS PROGRAM  
Acceptance Agreement/Renewal of Support**

Conference Name: \_\_\_\_\_ District Name: \_\_\_\_\_

Name of Church: \_\_\_\_\_ # of Church Members: \_\_\_\_\_

Church Address:

\_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Postal Code

Pastor: \_\_\_\_\_ Church Tel#: \_\_\_\_\_

Church e-mail: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Tel#: \_\_\_\_\_

Contact Title: \_\_\_\_\_ Contact e-mail: \_\_\_\_\_

Contact Address:

\_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Postal Code

**Global Mission Partners:** Global Mission Partner Churches must: Pay 100% of World Service Apportionments; pledge support for a missionary in a Covenant Relationship; sponsor a Person in Ministry (PIM) and share the experience with another church.

PIM COUNTRY	NEW ✓	RENEWAL YEAR	ADVANCE COUNTRY CODE/ PIM#	PIM DESCRIPTION	\$2/MEMBER or \$1,000
<i>EXAMPLE: ZIMBABWE</i>		<i>2007</i>	<i>10115L/120</i>	<i>Africa University Nurse</i>	<i>\$1,000 - EXAMPLE</i>

Length of GMP commitment for 1 year: Beginning: \_\_\_\_\_, \_\_\_\_\_ and Ending: \_\_\_\_\_, \_\_\_\_\_  
Month Year Month Year

**NOTE: Make your check payable to your annual conference; write the name of the country, description and The Advance PIM Code# on the check.**

Please indicate name of missionary (ies) the church is supporting in a Covenant Relationship:

\_\_\_\_\_

**\*DO NOT USE THIS FORM FOR COVENANT RELATIONSHIPS (Missionary Support)**

**MAIL/FAX ORIGINAL COMPLETED FORM TO:**

The Advance  
General Board of Global Ministries  
475 Riverside Drive, Room 350  
New York, NY 10115  
Tel: 212.870.3718  
Fax: 212.870.3775

<b><u>FOR OFFICE USE ONLY</u></b>	
<b>JURIS:</b>	NEW <input type="checkbox"/> RENEWAL <input type="checkbox"/>
<b>CONF#</b>	<b>DIST#</b>
<b>CHURCH#</b>	