



MEMBERSHIP APPLICATION FORM

All correspondence will be directed to the senior pastor or key contact.

- CHURCH MEMBERSHIP
- INDIVIDUAL MEMBERSHIP

Tick: Rev Pastor Mr. Mrs Other: _____

Senior Pastor or Key Contact: _____
First Name Last Name

Church Name: _____

Postal Address: _____

Telephone: _____ Mobile: _____ Fax: _____

Email: _____

- Yes I would like the Defining Moments audio journal posted to me on CD.
- Yes I will choose to download the MP3 Defining Moments audio journal from www.willowcreek.org.nz.

Please select in which of the following ministry areas you would like us to keep you updated on:

- Leadership
- Evangelism
- Network
- Youth Ministry
- Small Groups
- Children's Ministry
- Good \$ense
- The Arts

Thank you for your registration.

Please note:

- Annual Membership fee is \$150.00 (incl GST)
- Membership Application will not be able to be processed without payment.
- Your membership will be immediately active once you have received your membership number.

Payment Preference:

- Cheque:** Please make cheques payable to WCANZ
- Direct Credit:** ANZ account number: 01-0236-0074049-00 , Please phone office for reference #
Date of deposit _____
- Credit Card:** Please complete details below
 - Visa MasterCard
 - ____ / ____ / ____
- Exp __ / __ Name on the card _____
- Automatic Payment:** \$12.50 per month valid from your renewal date (You may set that up with your bank) Please phone office for reference #