



Women's Ministries
unlimited.

Connected application

It is time to apply for or renew your Annual Women's Ministries membership, and receive a beautiful certificate suitable for framing. Fill out and return this form to your District Women's Ministries Director.

Name of Church _____
Church City _____, MO
Pastor _____
Section _____

**FOR DISTRICT
WOMEN'S MINISTRIES
OFFICE USE ONLY.**

PROCESSED

Date Received _____
Date Charter Mailed _____

Women's Ministries Officers:

President or Coordinator _____
Mailing Address _____ City _____, MO, Zip _____

Vice President _____
Mailing Address _____ City _____, MO, Zip _____

Secretary/Treasurer _____
Mailing Address _____ City _____, MO, Zip _____

Check which groups you have:

Women's Ministries Total Members _____
 Event Evangelism Total Members _____

TOTAL OF ALL MEMBERS _____

Signature - Women's Ministries President

*Connections are issued by the District Women's Ministries Department.
Send completed form, along with \$20.00 to:*
Women's Ministries Department
528 West Battlefield Road, Springfield, MO 65807