



## Application for Church Plant Organization

NAME OF CHURCH PLANT TO BE ORGANIZED: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

MOTHER CHURCH \_\_\_\_\_ PASTOR: \_\_\_\_\_

ETHNICITY: \_\_\_\_\_

PRIMARY LANGUAGE: \_\_\_\_\_ SECONDARY LANGUAGE: \_\_\_\_\_

Church Leader: \_\_\_\_\_ email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Assisting Treasurer: \_\_\_\_\_ email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Assisting Clerk: \_\_\_\_\_ email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Pastor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Approved by Administrative Committee [ ] YES [ ] NO Date : \_\_\_\_\_

Date pastor was notified: \_\_\_\_\_

Please email completed application Office of Secretariat at [sfrodely@njcsda.org](mailto:sfrodely@njcsda.org). Thank you