



Evangelist Network Affiliation Request

*Evangelist - a Spirit-filled communicator of the gospel of the kingdom
who provides opportunities for people to accept Jesus Christ as Savior and Lord
and become responsible members of His church.*

1. NAME: _____
2. ADDRESS: _____
3. PHONE: _____
4. E-MAIL: _____
5. WEBSITE: _____
6. CHURCH: _____
7. ASSOCIATION: _____
8. PASTOR'S LETTER OF RECOMMENDATION
9. FIVE MINISTRY REFERENCES
 - 1) _____
 - 2) _____
 - 3) _____
 - 4) _____
 - 5) _____

10. SALVATION EXPERIENCE *(90 words or less)*
11. CALL TO EVANGELISM *(90 words or less)*
12. NORTH AMERICAN MISSION BOARD ENDORSEMENT *(Recommended, but not required.)*
13. METHODS OF EVANGELISM *(Check all that apply.)*
- | | |
|--|---|
| <input type="checkbox"/> Construction | <input type="checkbox"/> Music |
| <input type="checkbox"/> Evangelism Training | <input type="checkbox"/> Retreats and Conferences |
| <input type="checkbox"/> Leadership | <input type="checkbox"/> Revivals |
| <input type="checkbox"/> Missions | <input type="checkbox"/> Other _____ |
14. BIOGRAPHICAL SKETCH *(300 words or less)*
15. PHOTO *(Jpeg format no wider than 600 pixels OR a 5x7 or smaller picture that we may scan. Due to copyright restrictions, the picture must not be from a photo company.)*

SIGNATURE: _____ DATE: _____

PLEASE MAIL AFFILIATION REQUEST TO:

**South Carolina Baptist Convention
 Evangelization and Missions Team
 190 Stoneridge Drive
 Columbia, SC 29210**