

Notification of Status Change From Daughter Work to Autonomous Church

PLEASE PRINT

District Submitting Information _____

Name of New Church _____

Date Granted Church Status _____

Pastor _____ ID# _____

Physical Address _____

Phone _____

Mailing Address _____

Mother Church Releasing for Full Church Status

Name _____ Church ID# _____

Address _____

Pastor _____ ID# _____

Signature _____

District Superintendent or District Secretary