

# International Circle of Faith (ICOF)

## Credential Renewal Form

To apply for credential renewal please complete all questions.

**Name**

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

**Address**

**E-mail**

\_\_\_\_\_  
Street Address

\_\_\_\_\_

\_\_\_\_\_  
Street Address Line 2

**Home Number**

**Cellular Number**

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
City

\_\_\_\_\_  
State / Province

\_\_\_\_\_  
Postal / Zip Code

\_\_\_\_\_  
Country

**Do you wish to renew your Credentials with ICOF?**

Yes

No

**Do you agree the ICOF  
Constitution & Bylaws?**

Yes

No

**Ministers Credential  
renewal**

Ordained or Licensed Credential renewal \$ 100.00 USD

Associate minister Credential renewal \$ 100.00 USD

**Signature**

**Signature date**

\_\_\_\_\_

\_\_\_\_\_