New Membership Fees – Effective July 2024

For Payment: See Q Code on website

Vetted Apostle or Bishop with 3 or more churches………………………$300.00

Senior Pastor or Overseer with 1 to 2 churches……………………………$200.00

Ordained Clergy With Active Outreach Ministry……………………………$150.00

CFM Covenant Financial Plan Givings

Quarterly Tithe Offering …………………………………….…………..…….10% Church Giving Sunday

Convocation Membership Official Report…………………..…………………… $100.00
Church or Ministry Quarterly Tithing to CFM

Quarterly District Meetings

Prospective Applicant Information

Last Name_____First Name_____Middle Initial_____

Name of Church _____ Founder: Yes or No - Date Installed _____

Address_____City_____State_____

Telephone_____Cellular Phone_____FAX_____

Pastors Assistant Name_____Phone_____Email_____

Church Website_____Pastor's Email_____

Total Adult Members _____ Total Youth Members _____

Sunday Worship Time_____Mid-Week Worship Day/Time_____

Education -Specialized Experience -Skill - Trade

Trade or Certification _____Business Owner: Yes -   No

Name of Business_____ Month/Year Business Started_____

College Attended_____Degree Awarded_____

Bible School/Seminary or Training_____Name of Institution_____

Diploma or Degree Awarded_____   Numbers of Hours Attained_____

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☐ I acknowledge that the information I have provided in this document is true.

☐ I acknowledge and understand that the CFM may conduct a background
    check (criminal, educational and/or other).

☐ I acknowledge and commit to submitting any verification to support my application.

☐ I acknowledge that upon acceptance of this signed document by CFM leadership and by submitting
    the onetime application fee, (see payment addendum), I am officially an affiliate of CFM.

I hereby join Cathedral Fivefold Ministries fellowship and voluntary submit to follow its established rules and guidelines. I understand completely that by joining Cathedral Fivefold Ministries I do NOT surrender the autonomy of my church/ministry. I will support CFM by attending, participating and giving. In the event, my church or ministry decide to separate from Cathedral Fivefold Ministries, we further agree to submit a letter of resignation and surrender all certificates, titles and positions awarded to be rescinded immediately.

Signature of Pastor:_____

Printed Name of Pastor:_____

Signature of CFM Representative: _____

Printed Name of CFM Representative: _____