

TRUE HOLINESS GLOBAL CHURCHES, INC
CREDENTIAL CARD RENEWAL FORM
PLEASE PRINT CLEARLY

ANNUAL HOLY CONVOCATION DATE _____ CHURCH NAME _____

PASTOR NAME _____ STATE/DIOCESE _____

	CREDENTIAL TYPE	FIRST NAME	MI	LAST NAME	ADDRESS	CITY	STATE	ZIP
1								
2								
3								
4								
5								
6								
7								
8								

NUMBER OF CREDENTIALS BEING RENEWED: _____

SUBMITTED BY _____

TOTAL AMOUNT OF MONEY TURNED IN: _____

PAGE _____ OF _____

FOR LOCAL CHURCH ADMINISTRATORS