Member Profile Form World Assemblies of God Fellowship

Dlagge print	Date				
Please print Conoral Superintendent					
General Superintendent				Other:	
Spouse's Name					
INFORMATION:					
Address					
City			Count	ry	
Mailing address if different	ent from a	address	above:		
Address					
City			Country_		
	Is	this a s	ensitive co	ountry?	yesn
WAGF Region					
PHONE NUMBERS:					
Office					
Home					
FAX NUMBERS:					
Office					
Home					
E-MAIL ADDRESS:					
Preferred method of commi	unication	:			
gular airmail Fax E-Mail	☐ Other				