

# Participation Agreement of The Coalition of Spirit-filled Churches

Pastor's or leader's name and title

Name of church or fellowship

Mailing address (street or P.O. box, city, state, zip)

Telephone                      IRS Employer Identification Number      Email address  
(EIN)

We grant The Coalition of Spirit-filled Churches permission to grant and remove ecclesiastical endorsements on our behalf. This applies to both US Government needs as well as required by civilian pastoral care organizations.

Our church/pastor is a member of :  
(if applicable)

We have                      members/adherents.

Date:                              Signature & Title:

**Please complete and mail to:**

The Coalition of Spirit-filled Churches

Post Office Box 6606

Newport News, VA 23606

**Or fax to:**

(425) 977-1360

**Or email to:**

**[chaplaincy@Spirit-filled.org](mailto:chaplaincy@Spirit-filled.org)**