Liberty Fellowship of Churches & Ministers, Inc.

	REQUEST FOR:	Ordination	Provi	Provisional Ordination	
Name:					
Phone:			Date: _		
Church/	Ministry Name:				
		esently holding?		Provisional Ordination	
*How lor	ng have you held cred	entials with Liberty Fello	owship?		
Please g credentia		your present ministry a	nd why you are red	questing the above	
Please li	ist one ordained memb	er of Liberty Fellowship	as a reference; inc	cluding phone number:	
	ubmitting your request, om one whom you are a	-	le a letter of recom	mendation from your pas-	
	Nigned				