



## 2026 DISTRICT CREDENTIAL RENEWAL

PERSONAL INFORMATION

Name & Last Name:	Level:
Mailing Address:	Physical Address:
NOTE: Retired ministers (65 years or older and <u>not active in ministry</u> ) DO NOT PAY RENEWAL	
Status: Active Minister Retired Minister	Ministerial ID#: Date of Birth:
Home Phone Number:	Cell Phone Number:
Email: Ministry(s) you Serve:	SMS text message?  VFS NO
Marital Status:	Anniversary Date:
Spouse Name:	Spouse Date of Birth:
Minister's Signature:	Date:
	ON: OF WHICH YOU ARE A PASTOR OR MEMBER
Church Name:	
Physical Address:	Olevek Diversity
Has any of the following char Address Email Phone Numb	nged within the past year? Check all that apply. Do NOT leave blank. per Marital Status Pastor Church Section Nothing Changed
THIS SECTION IS TO BE FILLED	OUT AND SIGNED BY YOUR PASTOR AND PRESBYTER
Has this minister actively participated in a viable min	istry and in preaching the gospel for a period of one (1) year?  YES  NO
Signature of your Pastor*	Date:
Signature of your Presbyter*	Date:
* WE WILL NOT PROCESS YOUR RENEWAL WITHOUT THE SIGNATURE OF YOUR PASTOR AND YOUR SECTIONAL PRESBYTER.	



Please send your renewal to the District Offices on or before October 31, 2025 with a check for \$80, payable to the Florida Multicultural District Council of the A/G.

(After this date, there will be a \$20 late fee)

**To make your payment online**, scan the QR code or visit our website at <a href="www.fmdag.org/giving">www.fmdag.org/giving</a> and select the option "Credentials – Annual District Renewal."