



# RWRL Charter Annual Application

## Northern New England District Council of the Assemblies of God

Thank you for chartering your local women's group. Your yearly \$10 membership fee assists us in mailing special promotional packets for all our women's events and keeps our records up-to-date.

Church Name \_\_\_\_\_

Church City/State \_\_\_\_\_ Pastor \_\_\_\_\_

Section (please circle one):

- (A) Aroostook    (N) Northern    (NC) North Central    (C) Central  
 (SE) Southeast    (MT) White Mountain    (SW) Southwest    (NW) Northwest

### Women's Leader/Team

**Leader:** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

**Assistant Leader 1:** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

**Assistant Leader 2:** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

Approximately, how many ladies attend your group? \_\_\_\_\_

Mail completed form along with \$10 check to:  
 NNED - RWRL 501 Riverside Street Portland, ME 04103-1034

or

Pay by credit card and Fax 207.878.2779

Name: (as appears on credit card) \_\_\_\_\_  
 Credit Card: Discover  MasterCard  Visa  Phone \_\_\_\_\_  
 Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 Card Expiration Date: \_\_\_\_ / \_\_\_\_ Credit Card billing zip code \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

For District Use Only:  
 Amount: \_\_\_\_\_  
 Check #: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Updated: \_\_\_\_\_