

# ETA CHURCH MEMBERSHIP PROGRAM APPLICATION FORM

Please Type or Print

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

Church Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Church Phone: \_\_\_\_\_

Church Shipping Address (if different than Billing Address):  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Church FAX: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Do you have an existing ETA account number? If so, what is the number? \_\_\_\_\_

If so, what name (personal or church) is the account under: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone (if different from church phone): \_\_\_\_\_

Position in Church: \_\_\_\_\_

Senior Pastor Name (if different from contact name): \_\_\_\_\_

Denominational/Network Affiliation of Church: \_\_\_\_\_

Sunday Morning Attendance (average): \_\_\_\_\_

How many teachers/workers in your Sunday School program? \_\_\_\_\_

Does your church currently sponsor a Bible Institute? \_\_\_\_\_ If so, please enclose a copy of your current catalog or list of course offerings.

How do you plan to utilize ETA in your church or ministry? \_\_\_\_\_

## Membership Agreement

It is my understanding the *ETA Church Membership Program* will provide my church with the following benefits:

- A framed membership certificate
- A Rewards Program when you purchase ETA materials
- Materials for 12 60-minute training sessions on CD-ROM
- Free review copies of all new and revised *ETA Classroom Series* textbooks
- Free ministry counseling available from ETA
- Free *ETA Christian Education Evaluation Form*
- A one-time new member's bonus gift of all *ETA Classroom Series* textbooks

This membership may be cancelled within 30 days with the return of all materials in saleable condition. Thereafter, this membership program will be automatically renewed each year. The first year's membership fee will not be refunded after the first 30 days of membership. After the first year, the church's membership may be cancelled at any time by notifying ETA, in writing, of the cancellation.

Our church is in full agreement with the ETA Doctrinal Statement and:

- I have enclosed payment of \$99.00
- I want to pay the \$99.00 by credit card Card # \_\_\_\_\_ Exp. \_\_\_\_\_  
Vcode (3 digit code on the back of the card in the signature panel) \_\_\_\_\_

Make a copy of the original application form for your records.

\_\_\_\_\_  
Church Contact

\_\_\_\_\_  
Date

**Evangelical Training Association**

PO Box 327 • Wheaton, IL 60189 • Website: [www.ETAworld.org](http://www.ETAworld.org)