

## UA GRACE Application For Mission Organizational Support

Applicant Name: \_\_\_\_\_

Are you a member or regular attender of UA Grace? (Yes, No) When we are in town.

Address: \_\_\_\_\_

Phone: Daytime: \_\_\_\_\_ Evening: \_\_\_\_\_ Cell \_\_\_\_\_

E-mail address: \_\_\_\_\_ FAX: \_\_\_\_\_

Why do you feel UA Grace should partner with this mission organization? \_\_\_\_\_  
\_\_\_\_\_

Do you have personal experience with this organization? \_\_\_\_\_ If yes, in what capacity?  
\_\_\_\_\_  
\_\_\_\_\_

Please include the following with this application:

1. Statement of Faith for this organization. Since GBIM is a ministry of the Fellowship of Grace Brethren, we have the exact same statement of faith as your church.

2. Description of the ministry of this organization

GBIM exists to help Grace Brethren Churches deploy church planting teams to start church planting movements around the world.

3. Contact information for this organization

Grace Brethren International Missions

P.O. Box 588

Winona Lake, IN 46590

www. Gbim.org

(574)-268-1888

**Date Submitted:** \_\_\_\_\_

Please mail or return to Missions, UA Grace; 4065 Kenny Road, Upper Arlington, OH 43220.