

Church Membership Confirmation

Church Name

Mailing Address

City – State – Zip

Phone

This verifies that _____ is a member in
Team Member
good standing of _____ Church.

We commend _____ to Northwest Baptist
Team Member
Disaster Relief for standing as a *Recognized Volunteer*; we also commit as
God leads to pray for, encourage and support _____
Team Member
and Northwest Baptist Disaster Relief, especially during times of disaster
response. We look forward to _____'s
Team Member
testimony of God's activity through disaster relief ministry.

Pastor*

Email Address

*If the pastor is being commended, or the position is vacant, then the chairman of
deacons or designated church leader may sign.

Return completed form to:
Northwest Baptist Disaster Relief
6715 NE 63rd St. Suite 103-516
Vancouver, WA 98661-1980
360.882.2100
Fax: 360.882.2295