

India Missions Association

MEMBERSHIP APPLICATION FORM

(Please read the GUIDELINES FOR MEMBERSHIP before filling up the application form)



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India Missions Association

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MEMBERSHIP APPLICATION FORM

A. GENERAL:

Name of the Mission / organization / Institution / Church / Diocese / Church Mission Board /	
Denomination / Affiliation / Sister Orgn:	
Name of the Chief Executive / General Secretary / Executive Director	
Year of Formation	
Mailing Address: <i>(Include Door No, Street Name & Pin code)</i>	
Telephone(s)	
Fax:	
E- Mail:	
Website:	

B. REGISTRATION DETAILS:

AUTHORITY	NUMBER	DATE / YEAR	STATE / CIRCLE
Registrar of Societies			
Trust Registration			
Registrar of Companies			
Commissioner of Income Tax <i>(PAN number)</i>			
Ministry of Home Affairs <i>(FCRA number)</i>			

C. STAFF DETAILS:

CATEGORY OF STAFF	PAID	VOLUNTEER / ASSOCIATE
Missionaries		
Pastors / Faculty		
Evangelists		
Tent makers / Bi vocational Ministers		
Administration / Office / Promotional		
Others		
TOTAL		

D. DETAILS ABOUT MANAGING / EXECUTIVE BOARD / COMMITTEE / TRUSTEES

S.No.	Name in Full	Residential Address	Occupation / Employment	Designation in the Organization	Relationship with other Board members¹
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

¹ Specify if they are family members, generally no two members of the same family is encouraged to be office bearers of the board

E. NATURE OF MINISTRY

(Please tick (✓) which ever best describes the nature of your ministries)

1.	CHURCH PLANTING	
a.	Cross Cultural	
b.	Mono Cultural	
c.	Denominational	
d.	Independent / Indigenous	
e.	Small Groups – <i>Cells Church, House Churches etc.,</i>	
f.	<i>Any other – Specify</i>	

2.	EVANGELISM	
a.	Mass Evangelism	
b.	Friendship	
c.	Door to Door	
d.	Mail / Correspondence	
e.	Open Air/ Street Preaching	
f.	<i>Any other – Specify</i>	

3.	TRAINING	
a.	Missionary /Evangelists	
b.	Pastors / Lay leaders	
c.	Tent Makers / Bi-vocational Ministers Training	
d.	Vocational Training	
e.	Leadership Training	
f.	Discipleship Training	
g.	Counselling Training	
h.	Management Training	
i.	<i>Any other - Specify</i>	

4.	RESEARCH	
a.	People Groups	
b.	Geographical Regions	
c.	Linguistic	
d.	Mission Trends	
e.	Church Growth	
f.	Social Trend	
g.	Response to Evangelism	
h.	Missiology	
i.	Theology	
J	<i>Any other – Specify</i>	

5.	SOCIAL DEVELOPMENT	
a.	Relief	
b.	Rehabilitation	
c.	Literacy	
d.	Primary Healthcare units	
e.	Hospitals	
f.	Child Care Centres	
g.	Orphanages	
h.	Poverty Alleviation	
i.	Community Development	
j.	Micro Enterprises	
k.	Social Action Program	
l.	Old Age homes	
m.	Educational Institutions	
n.	Hostels & Homes	
o.	Rehab Homes for Addicts / Specially abled peoples etc.,	
p.	Refugee Camps / Centres	
q.	<i>Any other – Specify</i>	

6.	RESOURCE / FACILITATION	
a.	Missionary Salary Support	
b.	Finance Support – Projects / Programs	
c.	Intercession & Prayer Mobilisation	
d.	Missionary Welfare Support / Plans	
e.	Rest & Retreat Homes / Centres	
f.	Counselling / Debriefing Centres	
g.	Evangelism Tools & Literatures	
h.	Training Modules / Resources	
i.	Project Consultancy	
j.	Management Consultancy	
k.	Capital Investment Support	
l.	Loans & Advances	
m.	Partnership & Networking	
n.	<i>Any other – Specify</i>	

7.	TRANSLATION	
a.	Bible	
b.	Devotional Books	
c.	Training Materials	
d.	Missiological Books	
e.	Evangelistic Literature	
f.	<i>Any other – Specify</i>	

8.	CREATIVE MINISTRIES	
a.	Coffee Shops	
b.	Counselling Centres	
c.	Book Shops / Literature Sale	
d.	Gym / Sports Centres	
e.	<i>Any other – Specify</i>	

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9.	MEDIA	
a.	Radio	
b.	Television	
c.	Films	
d.	Literature	
e.	Internet/Web	
f.	Audio	
g.	Video	
h.	Arts and Entertainment	
i.	Ethno Musicology / Music	
j.	<i>Any other – Specify</i>	

F. REFERENCE

Give names of **three** National / State level Christian leaders, (*One of them should be IMA member*) who are not related to you and who can give a confidential reference about your organization.

No.	Name	Designation	Organization	Address (in BLOCK letters)
1.				
2.				
3.				

G. DECLARATIONS

We subscribe to the IMA's statement of faith

Yes No

We abide by the annual membership contribution

We abide by the best practices of Ministry, Leadership & Management as advocated by IMA.

We attest that all the information provided in the application is true to the best of my knowledge.

Place:

Signature of Chief Executive

Date:

Appendix I

No	Addresses of Mission Stations / Field offices	Number of workers	Year of opening
1			
2			
3			
4			
5			
6			
7			
8			

Note: Please photocopy and use additional sheets if necessary

Appendix II

No	Addresses of Branch offices / Promotional offices	Number of workers	Year of opening
1			
2			
3			
4			
5			
6			
7			
8			

Note: Please photocopy and use additional sheets if necessary

Appendix III
Category of Peoples being ministered
(Please tick (✓) which ever applies to you)

1.	<i>ETHNIC</i>	
a.	<i>Tribal</i>	
b.	<i>High Caste</i>	
c.	<i>OBC</i>	
d.	<i>Dalits / Scheduled castes</i>	
e.	Any other – Specify (You may add a separate sheet)	

2.	<i>SOCIO ECONOMIC</i>	
a.	<i>Poor</i>	
b.	<i>Middle Class</i>	
c.	<i>Elite</i>	
d.	<i>Rich</i>	
e.	<i>Refugees</i>	
f.	<i>Diaspora</i>	
g.	<i>Specially Abled peoples</i>	
h.	<i>Marginalized Groups like Lepers, Eunuchs, Prisoners etc.,</i>	
i.	<i>Special Groups: Singles / Women / Men / Families</i>	
j.	Any other – Specify	

3.	<i>GENERATIONAL</i>	
a.	Children Below 13 years	
b.	Teenagers 13 – 19 years	
c.	Youth 20-35 years	
d.	Middle Aged – Above 35 years	
e.	Elders – Above 60 years	
f.	Any other Specify	

4.	<i>RELIGIONS</i>	
a.	<i>Animists</i>	
b.	<i>Atheists</i>	
c.	<i>Philosophical Hindus (Brahmins)</i>	
d.	<i>Christian Sects</i>	
e.	<i>Jains</i>	
f.	<i>Muslims</i>	
g.	<i>Popular Hindus</i>	
h.	<i>Sikhs</i>	
i.	<i>New Age movements / Guru Movements</i>	
j.	Any other – Specify	

5.	<i>VOCATIONAL</i>	
a.	<i>Students</i>	
b.	<i>Professionals</i>	
c.	<i>Traders</i>	
d.	<i>Politicians</i>	
e.	<i>Sportspeople</i>	
f.	<i>Bureaucrats</i>	
g.	<i>Business people</i>	
h.	<i>Artists / Artiste</i>	
i.	<i>Media persons</i>	
j.	<i>Farmers / Land owners</i>	
k.	<i>Industrial Workers</i>	
l.	<i>Unskilled labourers</i>	
m.	<i>Skilled labourers</i>	
n.	<i>Uniformed Personnel</i>	
o.	Any other Specify	

Appendix IV
Places of Ministry

(Please tick (✓) wherever you have an office or a worker based)

North India		North Eastern India	
Bihar		Assam	
Chandigarh (U.T.)		Arunachal Pradesh	
Delhi (U.T.-NCT)		Meghalaya	
Haryana		Nagaland	
Himachal Pradesh		Manipur	
Jammu & Kashmir		Mizoram	
Jharkhand		Sikkim	
Punjab		Tripura	
Rajasthan		Central India	
Uttar Pradesh		Madhya Pradesh	
Uttaranchal		Chhattisgarh	
South India		Overseas	
Tamil Nadu		Europe	
Andaman & Nicobar (U.T.)		Gulf	
Andhra Pradesh		South Asia	
Pondicherry (U.T.)		South East Asia	
Karnataka		North America & Canada	
Kerala		Pacific Regions	
Lakshadweep (U.T.)		Central Asia	
Eastern India		North East Asia	
Orissa		Africa & West Indies	
West Bengal		South America	
Western India		Any Other (Specify)	
Daman & Diu (U.T.)		MYANMAR	
Dadra & Nagar Haveli (U.T.)			
Goa			
Gujarat			
Maharashtra			

Appendix V

Purpose of Ministry

a) Please explain the vision of the organisation's ministry in not more than two sentences?

To preach the Gospel to all over the world and to look after human beings wherever they need..For Example:Alcoholic,Drug Addict etc.

b) Please write the two most important objectives of your organisation?

- 1.To have partnership in Mission with others Missions
- 2.Direct and indirect Evangelism towards unreach people.

c) Please write three goals of your organisation for the next five years?

- 1.To Strengthen our organisation(Zoram Evangelical Mission)
- 2.To Strengthen the faith of the new believers in Physically and Spiritually.
- 3.To have Mission partnership members as much as we can so that we have a good relations with others Ministry/Organisation.We can preach the Gospel all over the world.