



BAPTIST ASSOCIATION OF BELIZE
P.O.Box 338, Belize City
Phone 501-227-1654; 501-660-0707
Email: belizebap@btl.net



Request for ordination of Pastor in the Baptist Association of Belize

We the church _____ after having met in
Church's name
conference and agreed as a body _____ request the ordination of our
date
pastor _____.
Pastor's name

Pastor's information:

Name in full _____ (First, Middle, Last)

Date of birth _____ (Day, Month, Year)

Address _____

Telephone _____

Email _____

Please begin the process for ordination of our pastor as soon as possible.

Church Secretary or Representative

* Attach minutes of meeting if available.

