



# warrior nations

## F E L L O W S H I P

*www.warriornations.org*

Headquarters  
Greenwood, South Carolina

### Covenant Agreement of Ministries & Churches

We, (a) \_\_\_\_\_, do here by agree fully with the vision of (b) *Warrior Nations Fellowship (WNF)*. We have completed the required doctrinal courses and agree fully with this doctrine based upon God's Word.

(a) \_\_\_\_\_ does understand WNF expectation is an ministerial fellowship fee of \$125.00 and 10 % or more of our ministry's monthly total income, sent in monthly, as a part of our covenant agreement with (b) *WNF*. *WNF* agrees to license, ordain, and provide able worker permits to all in the said ministry (a) that have met the requirements set by ministry (b) *WNF*. Each situation will vary upon education, experience, and recommendation. Credentials are valid only if the ministry or church fulfills all the agreed upon conditions (ie. fee, suggested monthly 10% of ministry income, & attends at least one WNF event/holy convocation.)

(b) *WNF* will also provide complete assistance in obtaining ministry, or group exemption (a) \_\_\_\_\_'s 501 (C) (3) non-profit tax-exemption status and will provide counsel in every area requested (within the function of a 501 (C) (3) non-profit, tax-exempt organization) by the said ministry (a).

Ministry (a) also agrees to attend **at least one** of *WNF's* holy convocations/events annually. In doing this, ministry (a) is able to maintain a working level of unity with *WNF* and stay current with the progression of *WNF*.

*WNF* will provide the opportunity for people involved in ministry (a) to attend a Bible Institute for continual biblical education classes, if requested by the said ministry (a). All classes are subject to separate fees, other than annual ministerial fees.

(a) \_\_\_\_\_ agrees to submit any situations (situations that could jeopardize the said two (a) and (b) ministries in any way, creditability and character, etc. to the *WNF Board of Directors*. Any said situation would then be prayed about, discussed by the *Board of Directors* in confidentiality and then a recommendation of action would be made according to scripture by the *Board of Directors* to the said ministry (a). (a) \_\_\_\_\_ does not relinquish control of their ministry in any way by signing this Covenant Agreement, but does agree to consult the *WNF Leadership* for a recommendation before taking any action, in any matter that would jeopardize the two said ministries (a) and (b) in any way, or would take ministry (a) outside the vision and doctrine of (b) *WNF*.

At any time ministry (a) feels led to relinquish this covenant agreement, ministry (a) is able to pull out of this covenant agreement without any legal repercussions, whatsoever. At anytime ministry (b) *WNF* feels led to relinquish this covenant agreement with the said ministry (a), *WNF* is able to do so without any legal repercussions, whatsoever.

Either of the two said ministries (a) and (b) that do pull out of this covenant agreement will be required to submit in writing to the non-active party involved the nullification of the covenant agreement.

Ministry/Church (a) \_\_\_\_\_

<i>Address</i>	<i>City/State</i>	<i>Phone</i>
<i>Person</i>	<i>Title</i>	<i>Date</i>
<i>Person</i>	<i>Title</i>	<i>Date</i>

Ministry (b) ***Warrior Nations Fellowship***

<i>Person</i>	<i>Title</i>	<i>Date</i>
<i>Person</i>	<i>Title</i>	<i>Date</i>
<i>Person</i>	<i>Title</i>	<i>Date</i>

*We have read the WNF doctrine statement and agree with it.*

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

*We have read the WNF vision statement and agree with it.*

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

*We will do our best to further the Kingdom of God by spreading the good news, follow the polices of WNF, and commit to communicate with and pray for the leadership of WNF.*

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_