

INDIVIDUAL / JOINT INVESTMENT APPLICATION

New ApplicationChange of Information		For Off. Account #	ice Use Only	For Office Use Only Investment #	
1. Type of Account R	egistration				
☐ Individual ☐ Joint With	n Rights of Survi	vorship	· ·		
2. Owner Information	(s) (Applicant)				
Applicant Name:					
Address:					
City:					
Home Phone					
Email:					
Marital Status:	☐ Married ☐	Widow	Birth Date:		
3. Co-Owner Information	on (If Applicable	e) (Attach additi	onal sheet for mor	re co-owners)	
Co-Applicant Name:					
Address:					
City:					
Home Phone					
Email:				SS#	
Marital Status:	☐ Married ☐	Widow	Birth Date:		
Co-Applicant Name:					
Address:					
City:		State:		Zip:	
Home Phone		Work:		Cell:	
Email:				SS#	
Marital Status:	☐ Married ☐	Widow	Birth Date:		
4. Church Affiliation					
Church Name:					
Church Address:					
We'd love to hear how our m	inistry is helping	you fulfill your n	nission and vision. I	Please share how this i	nvestment will
enhance your Gospel impact	-				
5. "Payable On Death" I	Designation (Ben	eficiaries)			
■ I would like my/our accor	unt(s) designated	"Payable On De	ath" (attach additional s	heet if needed)	
Beneficiaries Nar	ne & Address	Date of Birth	Social Security #	Relationship	Share
1.					%
2.					%
3.			_		%
If one or more of the benefic	ioriae prodocess	s ma I would like	their share to \square	o to the estate or hairs	of the
ii one of more of the benefici	iaries predecease	s me, i would like	then share to 🔲 g	o to the estate of neits	of the

deceased beneficiary or \square be equally shared among the remaining beneficiaries. If neither are checked, funds will be

made payable to the estate or heirs of the deceased beneficiary.

Certificate(s) in the following type(s) and amount(s). Attach a voided check and mark Via ACH below to authorize an electronic funds transfer of the initial investment amount. Please have available funds for transfer the day application is made with CGIF.							
Investment Type Demand Certificate Timed Certificate	Initial Investment Amount	Investment Term 6 Months 1 Year 5 Years 7 year		Via ACH	Are you an ordained pastor? Yes No		
Demand Certificate Timed Certificate		□ 6 Months □ 1 Yea □ 5 Years □ 7 years	r 3 Years		If yes, Please attach a Certificate of Ordination. *Certificate of Ordination is required to receive the Pastor Generosity Certificate. (Additional 0.10% APY on each new investment)		
☐ Demand Certificate ☐ Timed Certificate		1	Other:	0			
Demand Certificate Timed Certificate		6 Months 1 Years 5 Years 7 years	3 Years Other:				
7. Distribution o	f Interest (If none checked,	default will be "Accumula	ate and compound in	my investmen	t.)		
 □ Accumulate and compound in my investment. □ Pay to me by electronic funds transfer* □ Monthly □ Annually *Attach a copy of a voided check 							
8. On-Line Account Information Access and Type of Statement							
☐ Please sign me up	for On-Line access to my	account information.	(Instructions on how to 1	register for this ser	rvice will be emailed to		
you) Account statemen	nts are provided monthly	y. I would like to re	ceive my statem	ent in the fo	ollowing way:		
☐ Electronic Stater	nent (On-line account a	ccess required)	Paper statement	sent via US	S mail		
Save \$35 annua	l fee by enrolling in bot	th online access and	electronic staten	nents.			
9. Acknowledge	ment and Authorizatio	n					
The undersigned has been advised that the Certificates of Participation (the "Certificates") of Church Growth Investment Fund, Inc. ("CGIF") offered to the undersigned, have not been registered under the Securities Act of 1993, as amended, or applicable state securities laws, that the Certificates are being offered and sold pursuant to exemptions from the registration requirements of these laws, and that the reliance of CGIF on these exemptions is predicated in part on the undersigned's representations to CGIF contained in this application. The undersigned represents and warrants that he/she is a member of the limited class as defined in the Offering Circular and acknowledges that he/she has reviewed the Offering Circular regarding the Certificates and understands the risks involved in an investment in the Certificates.							
of the persons listed proceeds thereof, and require the consent of Common, upon the or Participation Certifica added and a beneficial upon the death of the case of Joint Ownthe order of the survibeneficiary above. Application regardless whether any party to the Under the penalties of	as Joint Owners above for the Joint Owners listed abo all Joint Owners before ma death of the Individual or tes owned by Individuals or try or beneficiaries named w Individual and (2) to the list ers with right of survivorsh ving Joint Owner upon the CGIF shall be protected in soft whether such action is the Participation Certificate	r the redemption, transove hereby consent and aking such disposition. a Joint Owner, the irror Joint Owners with the redempticated, will be ted beneficiary upon the ip, CGIF may pay and/e death of the other Join making payments a consistent with the claims disabled or incapacitate the numbers shown of	sfer or other disponance to such action For Participation of the right of survivor redeemable and participation of the last soor transfer a Participation of the last soor transfer a Participation of the last soor transferring Participation of	osition of the on. Neverthel Certificates for ty becomes or ship having a yable as follows a certification Certifi	dentification number and (2) that		
notified me/us that I/w	b backup withholding as a serie are no longer subject to b		rt all interest or di	vidends, or t	he Internal Revenue Service has		
SIGNATURE(S) Signature:	Sig	nature:		Signature:			
	Sig						
Mother's Maiden Name	Date: Mo	other's Maiden Name:		Mother's Ma	iden Name:		
	E TELEPHONE TRANSFER			instruction where a	written request may be required		

6. Type of Investment: Subject to the terms and conditions of the Offering Circular, the undersigned elects to purchase Participation