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Request for Membership



Please submit this form in one of the following ways:

- Email as an attachment to members@churchoftheeast.ca
- Surface mail to PO Box 20035, James str outlet, Wallaceburg ON N8A 5G4
- Fax to (519) 627-7791

Privacy

All information provided on this form will be kept strictly confidential. This information is intended for administrative purposes only.

Mailing Address

City

Province

Country

Code

Please state your reason(s) for requesting membership of Church of the East, and tell us a bit about yourself.

First name

Last name

* I have read the Rules for Online Members and agree to abide by it
Yes No

*I have studied the Basic Doctrines, FAQ and Scripture pages. I agree with the basic tenets of Church of the East and desire membership of the organisation Yes No

Tel

Fax

Email address

Email again

Web address

Date of birth (yyyy mm dd)

Gender

Please indicate the type of membership you require. Tick any one or more boxes that may apply. Based on the answers below you may be required to provide further details at a later time.

Ordinary Membership

Executive Membership

[if you are interested in organising a local/provincial group]

Studies for ordination

Studies in Basic Doctrines

(short course)

Signed:

Date: (yyyy mm dd)