

CHURCH NAME

Current Church Name _____ Church ID _____

Proposed Official Church Name (as should appear on certificate) _____ Section Number _____

MAILING ADDRESS

Unit Number - Street Number - Street Name _____

City _____ Province _____ Postal Code _____

Phone _____ Fax _____ E-mail _____

CHURCH STREET ADDRESS

(if different than above)

Unit Number - Street Number - Street Name _____

City _____ Province _____ Postal Code _____

Church Charitable Registration Number _____

CHURCH INFORMATION

(To be completed by church official)

PASTOR

Credential Number _____ Title _____ First Name _____ Initial _____ Last Name _____

Unit Number - Street Number - Street Name _____

City _____ Province _____ Postal Code _____

Phone _____ Fax _____ E-mail _____

BOARD SECRETARY

Title _____ First Name _____ Initial _____ Last Name _____

Unit Number - Street Number - Street Name _____

City _____ Province _____ Postal Code _____

Phone _____ Fax _____ E-mail _____

CHANGE/ACTION

(To be completed by district official)

Close Church Church Disaffiliated

Name Change

New name as approved by district executive _____

Church Charitable Registration Number _____

Print Church Name (As it appears on certificate) _____ Directory City _____

A letter from the church must be included with the form reporting the following information: 1) date of the duly-called congregational meeting; 2) wording of the resolution presented for consideration; 3) number of members voting; 4) the official results of the vote (at least a two-thirds (2/3) majority vote of the members present and voting is required).

OFFICIAL ENDORSEMENT

I hereby authorize the action indicated for the above assembly as approved by the _____
 _____ District Executive, of PAOC on this ____ day of _____, year _____

Signed: _____
 District Representative _____ Position _____