



GENERAL CONFERENCE OF THE

CANADIAN ASSEMBLIES OF GOD

5845 boul. Couture, St-Léonard, QC, Canada H1P 1A8

Tel. 514 279-1100 • Fax 514 279-1131 • Website: www.caog.ca • email: office@caog.ca

CHURCH AFFILIATION APPLICATION

(Please note that a processing fee of \$100 payable to the Canadian Assemblies of God should be included with this application)

Date _____

Church Legal Name _____

Church Operating Name (if different) _____

Address of Church _____

City _____

Province _____

Postal Code _____

() -
Phone Number

() -
FAX

email

Website

Pastor's Name _____

() -
Phone Number Off.

() -
Mobile

email

Office Administrator Name _____ () -
Phone Number Off. email

Previous Affiliation (if applicable): _____

Reason for leaving: _____

Legal Status of Church: _____

BN/Registration Number: _____

Charity Status: _____



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Trustees:

_____	_____
Name	Position
_____	_____
Name	Position
_____	_____
Name	Position
_____	_____
Name	Position
_____	_____
Name	Position



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An agreement between the **General Conference of the Canadian Assemblies of Canada** and the Church Body whose name appears on this application form:

We, the Church Body, under the leadership of the Pastor and Trustees of

Church Name

in being accepted into fellowship with the **General Conference of the Canadian Assemblies of Canada**, pledge ourselves to abide by the Constitution and By-Laws of the **General Conference of the Canadian Assemblies of Canada** and to be governed by them.

We further agree to participate in national and regional meetings, events and conferences by sending representations whenever possible and to contribute, to the best of our ability, toward the financial and spiritual support of the **General Conference of the Canadian Assemblies of Canada**.

In so agreeing, we, the Pastor and Trustees, place our signatures below:

Pastor

Trustee

Trustee