

Date: / /20

Chaplains Office of Canada Registration Form

1730 Weston Road – Suite 101 – York, Ontario – M9N 1V6
(416) 248 – 1252

chaplainsofficeofcanada@yahoo.com

Please complete all sections of this application form and return via email.

Note: \$100.00 deposit is required at the time of application.

Name: _____

Phone #: (_____) - _____ - _____ Cellphone #: (_____) - _____ - _____

Email: _____

Date of Birth: Month (_____) Day (_____) Year (_____)

- Male
 Female

Address: _____ City: _____ Province: _____

Postal Code: _____

Name of Church You Attend: _____

Pastor's Name (Reference): _____

Church/Pastor's Phone #: _____

Year of Your Salvation: _____

Have you been Water Baptized?

- Yes
 No

Are you interested in becoming a Non – Christian Chaplain? (Example: Jewish, Muslim, etc.,)

- If yes, please specify _____
 No

Educational History

Name of School: _____ Years Attended: _____

Area of Study: _____

Degree Earned: _____

Cost: \$1500.00 (including deposit) + tax, includes:

Certification, Practical Experience, Ordination Service, I.D Card and Badge

Payment:

- Visa or Master card
 E-Transfer

CC #: _____ Exp Date: _____ CVV: _____ Postal Code: _____

Signature