



Membership Application
NORTH CAROLINA
CHAPLAINS ASSOCIATION
ESTABLISHED 1965

This application is NEW (complete form below), **RENEWAL** (Fill in NAME and any new/changed information since your last renewal).

NAME _____

APPLICATION DATE _____

PRESENT CHAPLAIN POSITION:

volunteer resident staff chaplain CPE supervisor retired other

If other, please indicate position: _____

INSTITUTION/FACILITY _____

PREFERRED MAILING ADDRESS _____

WORK PHONE _____ FAX _____

E-MAIL _____

PLEASE CHECK ONE:

_____ **APPLICATION FOR LEVEL OF MEMBER**

Full-time employment Part-time employment

Membership in the Association shall be open to all chaplains ordained, endorsed, commissioned, or recognized by a faith group and who are employed full or part-time in institutions, military, or industries within the State of North Carolina. Applicants shall be admitted to membership following the receipt of a formal application, recommendation by the Membership Committee, approval by the Association, and payment of current dues.

By which faith group are you ordained, endorsed, commissioned or recognized?

_____ Dues of **\$30 for Member** are payable with application.

OR (see page 2)

APPLICATION FOR LEVEL OF ASSOCIATE MEMBER

Student _____ Volunteer _____ Other _____ (continued on back)

Associate Membership in this Association shall be open to professional persons or students* who do not meet the requirements for membership, but who indicate interest in the purposes of this Association. Applicants shall be admitted to Associate Membership following the receipt of a formal application, recommendation by the Membership Committee, approval by the Association, and payment of current dues. Associate Members have all privileges of Membership except the right to vote or hold an elective office.

**CPE Residents/Interns should apply for Associate Membership.*

Dues of **\$15 for Associate Member** are payable with application.

Please list any special interests related to chaplaincy: _____

If you teach or present any type of workshops, please list those that might be of interest to our members:

Return application and dues (payable to NC Chaplains Association) to the membership chairperson:

Linda Browne
981 Bryansplace Rd., Winston-Salem, NC 27104
(336)760-1967
email: membership@ncchaplains.com