ALBERTA & NWT DISTRICT
THE PENTECOSTAL ASSEMBLIES OF CANADA

NEW CHURCH INFORMATION SHEET

(Please PRINT clearly)

CHURCH NAME

Official Church Name

MAILING ADDRESS

Unit Number - Street Number - Street Name

City | Province | Postal Code

Phone | Fax | Email

CHURCH STREET ADDRESS
(if different than above)

Unit Number - Street Number - Street Name

City | Province | Postal Code

STATISTICS

Please fill in the following information relative to your church:

Day of Church Service _____ Time _____

Attendance _____ Ethnic Origin _____

Organized Membership ☐ Yes ☐ No Number of Members _____

PASTOR

Credential Number | Title | First Name | Initial | Last Name

Unit Number - Street Number - Street Name

City | Province | Postal Code

Phone | Cell | Email

GOVERNANCE

Indicate if the assembly has a governing document:

☐ Yes (please attach constitution and/or by-laws) ☐ No

GOVERNING BODY MEMBERS
(if applicable)

Title/Position | First Name | Last Name

Title/Position | First Name | Last Name

Title/Position | First Name | Last Name

Title/Position | First Name | Last Name

Title/Position | First Name | Last Name

12140 103 Street NW, Edmonton, AB T5G 2J9, info@abnwt.paoc.org, www.abnwt.paoc.org, P: 780.426.0018, F: 780.420.1318