



The Pentecostal Assemblies of Canada (PAOC)
CHURCH NAME CHANGE/CLOSURE NOTICE
(Please PRINT clearly)

CHURCH NAME

Current Legal Church Name (as registered with the Canada Revenue Agency) _____ Church ID _____

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

Current Operational Church Name (if different from Legal Church Name) _____

Proposed Operational Church Name (as should appear on certificate if different from Legal Church Name) _____

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
PASTOR

(To be completed by church official)

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: Legal Church Name

Name Change: Operational Church Name

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

SAMPLE