

Honesdale Area Ministerium Membership Application Form

Personal Information:

- Full Name:
- Address:
- Phone Number:
- Email Address:

Religious Affiliation and Background:

Name of Religious Community:

- How long have you been part of this tradition?
- What is your position of leadership within your religious community?

Motivation for Joining:

- Why are you interested in joining the Ministerium?
- How do you believe your participation will contribute to the shared values of our religious traditions for the good of the larger community?

Commitment:

Please check the following boxes

- Are you willing to actively participate in regular Ministerium meetings?
- Can you commit to supporting fellow members and fostering understanding within the group?

References:

- Provide a reference from your religious community.

Declaration:

I, _____, affirm that the information provided in this application is true and accurate to the best of my knowledge. I have ***read the bylaws and agree to abide*** by the principles and values of the Ministerium. I understand that continuance as a board member or associate member requires that I attend a minimum of three quarterly meetings in a calendar year.

Signature: _____

Date: _____