

Lay Minister Licence - Application

PARISH/MINISTRY DISTRICT/CHAPLAINCY: _____

FULL NAME: _____

ADDRESS: _____

TELEPHONE: _____

EMAIL ADDRESS: _____

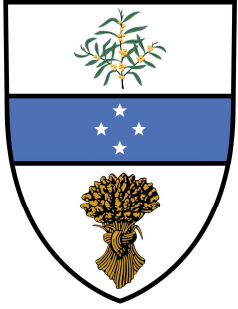
DATE OF BIRTH: ____ / ____ / ____

PROFESSION: _____

MINISTRY PROFILE

Write an outline of the Mission/Ministry area(s) for which a Lay Ministers Licence will be sought.
Licences will be granted for ministries of oversight or leadership in significant areas of ministry, e.g.

- a person to Conduct Worship
- a person to Preach
- a person with leadership of a Pastoral Care Program
- a person to act as Lay Chaplain to the Nursing Home, Hospital, etc.
- a person who will be the Parish Administrator
- a person with leadership of the parish Small Group Ministry
- a person with leadership of the program of Parish Based Care
- a person with leadership of such programs as Messy Church, Mainly Music, etc
- a person with leadership of Evangelism or the Ministry Unit Evangelism Coordinator
- a person with leadership of the Music Ministry
- a person with leadership of Youth Ministry
- a person to coordinate Outreach Ministry
- other leadership roles



DETAILS OF LICENCE

LICENCE TERMS The terms of the Licence are: (these words will appear on the licence)

INCUMBANT: _____

WARDENS: _____

DATE: ____/____/____