



The Apostolic Communion of Anglican Churches

The Mst. Rev. D. E. Chase

Presiding Archbishop

THE APOSTOLIC COMMUNION OF ANGLICAN CHURCHES PROVINCIAL AFFILIATION AGREEMENT

Whereas: the Apostolic Communion of Anglican Churches is the extraterritorial governing for all subordinate dioceses, parishes, societies, orders and affiliate ministries throughout the United States and its territories, and abroad; and

Whereas: the affiliated subordinate dioceses, parishes, societies, orders and affiliated ministries, societies have entered into mutual covenant to support and assist each other in fulfillment of the Great Commission instituted by our Lord and Savior Jesus Christ (Matt. 28:18-20), and to proclaim the Christian faith as set forth in the Holy Scriptures, the Apostles' and Nicene Creeds, the Catechism, the Book of Common Prayer, and the Chicago-Lambeth Quadrilateral; and

Whereas: we, the below signed representatives of our diocese have agreed to unite our Province with the Apostolic Communion of Anglican Churches, and to be governed by the Constitution and Canons of the Archdiocese:

Now, Therefore; be it known that _____, in the city of _____, _____, a Province of the Apostolic Communion of Anglican Communion has affirmed the statement of faith and has adopted the Covenant of Communion and has voted to become a member Province of the Apostolic Communion of Anglican Churches.

For the Diocese:

_____ Diocesan Council

_____ Bishop Ordinary

Be it further known that the Presiding Prelate of the Apostolic Communion of Anglican Churches has on this _____ day of _____, 20_____, approved this affiliation.

For the Apostolic Communion of Anglican Churches:

_____ Council President

_____ Presiding Archbishop



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NEW PROVINCE AFFILIATION

Please complete and return the below form along with the signed Provincial Affiliation Agreement to the Apostolic Communion of Anglican Churches. For questions email: info@theacac.org

Name of Province: _____

Name of Bishop: _____

Mailing Address: _____

City: _____ State/Province: _____

Country: _____ Zip/Postal Code: _____

Phone: _____ Secondary Phone: _____

Website: _____

Email: _____

Is this location open to the public? ___ YES ___ NO

Cathedral Address: _____

Cathedral City: _____ State: _____ Zip: _____

Ecclesial Affiliation: _____

Bishop: _____

Programs Offered: _____

Mail Completed Application To:

Apostolic Communion of Anglican Churches

P. O. Box 58612 • Louisville, KY 40268 USA

www.theacac.org

info@theacac.org