



INTERNATIONAL ASSOCIATION of CIVIL AVIATION CHAPLAINS

Application for Associate Membership

What to do next:

- 1 Complete the Application Form for Associate Membership available on line at www.iacac.info.

Mail to the IACAC Treasurer: Mrs Beverly McNeely
2571 Oak Drive
Clayton, IN 46118 USA

- 2 Your application must be supported by a letter of recommendation from your sponsoring chaplain in accordance with paragraph 6.2.4 of the Constitution which states:

6.2.4 **Associate Members:** for people interested in supporting airport chaplaincy. Associate members would have no voting rights and pay a reduced membership subscription. Application for associate membership would require a letter of recommendation from the sponsoring chaplain to accompany the appropriate membership application form.

. *The applicant must clarify the necessary process before the application is submitted.*

3. **Send**

- 1 **The Application**

- 2 **The Letter of Recommendation from the Sponsoring Chaplain**

- 3 **The Affiliation Fee - Payment may be made in the following ways :**

1. **PREFERRED PAYMENT OPTION**

ONLINE using Pay Pal through the IACAC website. www.iacac.info

2. **BANK DRAFT OR CHEQUE IN US\$**

Bank draft or cheque made payable to: -
International Association of Civil Aviation Chaplain
For US\$30

Mail to the IACAC Treasurer: Mrs Beverly McNeely
2571 Oak Drive
Clayton, IN 46118 USA

Tel +1[0]317 491 5089 Fax +1[0]317 244 9362

Email: treasurer@iacac.info

3. **CASH OR CHEQUE PAYMENT AT ANNUAL CONFERENCE**

Bank draft or cheque made payable to: -
International Association of Civil Aviation Chaplain
For US\$30

If you have any questions contact the Secretary

Miss Mary Holloway

e-mail secretary@iacac.info



INTERNATIONAL ASSOCIATION of CIVIL AVIATION CHAPLAINS

Application for Associate Membership

I hereby apply for Associate Membership of the
INTERNATIONAL ASSOCIATION OF CIVIL AVIATION CHAPLAINS.

I pledge my support to the Objects of the Association, as set out in the Constitution, and reproduced below.

I agree to my personal data being stored and processed to receive The IACAC Newsletter and all IACAC communications to members.

I include my Affiliation Fee - US\$ 30.00- Associate Membership

Signature
First name
Family name

<i>This Application is supported by</i>
Name
Authority.....
Sponsoring Chaplain
Signature.....
<i>A letter of Accreditation is included</i>

Extracts from the Constitution

4 Objects

- 4.1 To provide for and promote fellowship under God for those engaged in ministry in the unique environment of civil aviation.
- 4.2 To provide a continuing exchange of experience and insights to enhance the fulfilment of the task through the provision of high quality training and shared examples of good practice.
- 4.3 To develop understanding of how civil aviation functions, its effect upon people engaged in it and using it, and its influence in shaping the world.
- 4.4 To engage in mutual theological and sociological study and reflection relevant to the task.
- 4.5 To affirm and communicate our experience of God's one world, which is given to us through the nature of civil aviation and our involvement in it. Therefore to serve all people, irrespective of their faith, race, sexual orientation , disability or ethnic origin.
- 4.6 To nurture ecumenical, spiritual, interfaith and multicultural relationships in the world.

6 Membership of the Association

- 6.1 Membership of the Association shall be open to any person engaged in Chaplaincy in Civil Aviation who is interested in furthering the Objects **and who has paid the Annual Subscription (dues)** as laid down from time to time by the Executive Board.
- 6.2 (New) Members will be:
 - 1 **Active:** that is those engaged in regular full-time or part-time duties as a Chaplain either individually or as part of a Team. Accreditation for the appointment shall accord with the requirements of paragraph 6.6 (*see previous page*).
 - 2 **Associate Members:** that is for people interested in supporting airport chaplaincy. Associate members would have no voting rights and pay a reduced membership subscription. Application for associate membership would require a letter of recommendation from the sponsoring chaplain to accompany the appropriate membership form.

Application Details

Name in full	
Mailing address in full	
Telephone numbers with International & local codes	Home Mobile
e-mail address	
Faith Group	
Airport Name	IATA Code (3 letters)
Country	City
Name of Chaplaincy	
Name of Sponsoring Chaplain	
Chaplaincy postal address	
Chaplaincy email address	

I would like to become an Associate member of the International Association of Civil Aviation Chaplains because:

For Treasurer's use only

<i>Application received</i>		<i>Originals sent to</i>	<i>Secretary</i>	
<i>Affiliation fee</i>		<i>Copies sent to</i>	<i>Media Officer & V-Pres</i>	