



APPLICATION FOR REINSTATEMENT

SHAREWORD GLOBAL CANADA

PO Box 3619, Guelph, ON N1H 7A2

Tel: (519) 823-1140 · Fax: (519) 767-1913 · sharewordglobal.com

I. PERSONAL INFORMATION Mr. Dr. Mrs. Ms.

A. Name _____

B. Mailing address _____

City _____

Prov _____ Postal Code _____

Res. Phone: () _____

Mobile: () _____

Email: _____

Social Media handle (e.g Twitter, Instagram) :

C. Date of birth _____
 Day Month Year

Only fill this part out if it has been more than a year since you were a member or if you have a new church or pastor.

II. CHURCH INFORMATION

A. Name of the church _____

Denomination _____

Tel: () _____

Church address _____

City _____

Prov _____ Postal Code _____

Email: _____

B. What is the Pastor's name?

(Head Office will contact your pastor for a reference)

III. GIDEON / SWG MEMBERSHIP HISTORY

A. What year did you join The Gideons International In Canada / ShareWord Global? _____

B. What chapter did you join?

C. Did you attend chapter meetings? YES NO

Only fill this part out if it has been more than a year since you were a member.

D. Christian Friend / SWG member:
Name: _____

Email: _____

(Head Office will contact your Christian Friend / ShareWord Global member for a reference)

IV. WHY DID YOUR MEMBERSHIP LAPSE?