

IMPORTANT: Please complete and bring this form with you to Synod

Anglican Diocese of Ottawa SYNOD 2025 – October 23 - 25

Credential Form

Guest of Synod, Observer, Exhibitor

Please print clearly

NameFirst name	Surn	ame	
Address			
Please complete one of the following:			
Non-Voting Clergy Please indicate parish affiliation if applicable	OR	Non-Voting Laity Please indicate one of the following Postulant Other (Explain)	
Date:	Signature:		

This form must be signed and deposited with the Secretaries of Synod upon arrival, so that your attendance can be registered.

Please see reverse for a waiver form that requires your signature.



To be completed by the person identified on the reverse.

The Anglican Diocese of Ottawa records the proceedings of Synod to facilitate the preparation of the minutes.			
I consent to having my comments recorded.			
Photographs may be taken during Synod. These are for diocesan purposes only and may be used to illustrate an article or publicize an event.			
I consent to having my photograph used by the Anglican Diocese of Ottawa.			
Name	Date		
Signature			