



Veteran/Military Friendly Congregation (VFMC) Enrollment Form

Date: _____

Military Chaplains Association
Attn: Veteran/Military Friendly Congregation Program
P.O. Box 7056
Arlington, VA 22207-7056

This letter is to certify that the Congregation: _____ located
at address: _____, will complete the
following:

- We agree to adopt or implement one or more Military Ministry Programs.
- We agree to advertise the existence of the Military Ministry Program(s) in one or more of our congregation publications (service bulletins, newsletters, etc.) so that their existence is easily visible to visitors, members, and leadership of the congregation.
- We provide permission to the Military Chaplains Association and their affiliates to list our congregation information on their web site.

We would also like to be a Lead Congregation and help establish Military Ministries in parishes and congregations in our vicinity. *[If this does not apply, then erase or cross out this sentence]*

Signed: _____

Title: _____

Clergy Contact Info:

Name: _____

email: _____ phone #: _____

Lay Leader Contact Info

Name: _____

email: _____ phone #: _____

The enrollment form is to be signed *by the Rector, Pastor, Minister, Rabbi, or designated Congregation Leader.*