



Request for Worship Leader Licenses

*Dear Reverend: I recommend that the following person(s) be licensed as Worship Leader(s).
Licenses are in effect for THREE YEARS.*

Parish	Address
City/State/Zip	Phone
Rector/Priest-in-Charge or Senior Warden	Signature
Name (1)	Name (2)
Street	Street
City/State/Zip	City/State/Zip
Phone	Phone
E-mail Address	E-mail Address
Training Date and Place	Training Date and Place
Trainer	Trainer
Name (3)	Name (4)
Street	Street
City/State/Zip	City/State/Zip
Phone	Phone
E-mail Address	E-mail Address
Training Date and Place	Training Date and Place
Trainer	Trainer
Name (5)	Name (6)
Street	Street
City/State/Zip	City/State/Zip
Phone	Phone
E-mail Address	E-mail Address
Training Date and Place	Training Date and Place
Trainer	Trainer