



## New Wiccan Church, International Membership Application

**Instructions:** Please type or print clearly. When complete, return all required application form to your sponsor or a Branch Officer of the appropriate NWC Branch. Your application will be reviewed at the Branch level, and you will be notified of their decision. If you have not heard back from anyone within 60 days, please contact your sponsor or a Branch Officer. If you are accepted for membership at the Branch level, your dues for the current year must be paid and forwarded to the International Office before you are considered a member. Your Sponsor or Branch Officers will assist you with this process.

Public Craft Name: \_\_\_\_\_  
(This is the name which you use at Pagan gatherings, and which would appear in NWC publications.)

NWC ID# (Your choice of 4  
to 8 letters and/or numerals): \_\_\_\_\_

My confidentiality level is (circle one) 1 2 3 4      My involvement in Wicca may be known:

- 1 - (Officers/Coven Only) - only to people in my coven and Officers of the NWC.
- 2 - (NWC & Tradition) - only to those persons who are of my Tradition and/or are currently members of the NWC.
- 3 - (Craft and Pagan Community) - only to those persons who profess themselves to be Pagan or Wiccan.
- 4 - (Open) - to the general public under my Public Craft Name (which MAY be the same as my legal name).

My sponsor for membership is: \_\_\_\_\_. I am applying as an Elder / Associate Member (circle one)  
of the following Tradition(s) \_\_\_\_\_

Legal Name: \_\_\_\_\_

Other Names: \_\_\_\_\_  
(All aliases other than your Circle Name, such as nicknames, Craft names, etc.)

Driver's License/I.D. Number: \_\_\_\_\_ State/Province: \_\_\_\_\_ Country: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Time of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Gender: \_\_\_\_\_ Marital status: \_\_\_\_\_

Number of children at home: \_\_\_\_\_

Mailing Name and Address: (include zip or postal code)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Name and Address: [if different] (include zip or postal code)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Phone Number (include Area Code): \_\_\_\_\_

Email Address: \_\_\_\_\_

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Time to call? \_\_\_\_\_ Whom should we ask for? \_\_\_\_\_

Work Phone Number (include Area Code): \_\_\_\_\_

May we call you at work? \_\_\_\_\_ If yes, whom should we ask for?  
\_\_\_\_\_

I am presently a member of \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Coven Name) (Coven #) (Tradition)

1st Initiation \_\_\_\_\_ by \_\_\_\_\_ of \_\_\_\_\_  
(Date) (Initiator) (Coven & Tradition)

2nd Elevation \_\_\_\_\_ by \_\_\_\_\_ of \_\_\_\_\_  
(Date) (Initiator) (Coven & Tradition)

3rd Elevation \_\_\_\_\_ by \_\_\_\_\_ of \_\_\_\_\_  
(Date) (Initiator) (Coven & Tradition)

If you have any other initiations/elevations that we should know about, please briefly explain here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you currently a member of any other Pagan or Craft organizations? \_\_\_\_\_ If so, please list: \_\_\_\_\_  
\_\_\_\_\_

I certify that all statements on this application are true to the best of my knowledge.

\_\_\_\_\_  
(Signature - Legal Name) (Date)

\_\_\_\_\_  
(Signature - Public Craft Name) (Date)

[Received on \_\_\_\_\_ by \_\_\_\_\_]

[IMPORTANT! Please ask a member for further information about eligibility requirements for the NWC. You should receive the following documents before applying: NWC Flyer, Applicant Letter, a Hold Harmless Agreement, this Application form, and a copy of the current Bylaws for your review and consideration.]

Instructions for Sponsor and Branch Officers: Give one copy to the applicant, another is to be retained at the Branch level. Original goes to the International Office upon Branch approval. Dues must be collected by the appropriate Branch officer and sent to: NWC International Office, PO Box 162046, Sacramento, CA, 95819 in order for applicant to be considered a member. Dues may be prorated for the current year with the prior approval of the International Queen. (Application.rev2004Jan)



**New Wiccan Church, International**  
**Oath of Secrecy for New Applicant**  
(To be submitted with Application for Membership)

I, \_\_\_\_\_, (Legal First Name, Middle Initial & Last Name)

**Do of my own free will and knowledge, without reservation, solemnly swear:**

1. To ever keep the secrets of the Art as required of me by my Oath(s);
2. Never to reveal, release or permit to be revealed or released, in any way at all, to anyone not a member of the New Wiccan Church, International (NWC), any of the information imparted to me as part of the application process for membership, including but not limited to:
  - a. The names or other information of any members or other persons associated with the NWC, be they Witch or not;
  - b. The location of any meeting places of the NWC or its members;
  - c. The number of members in the NWC or any subgroup thereof;
  - d. Any nonpublic NWC materials, written or oral
3. That all materials submitted by me to the NWC in support of my application for membership are true, correct and complete to the best of my knowledge and belief;
4. That I will recognize every fellow member of the NWC as a brother or sister of the Art according to my oath, or I will immediately withdraw from membership;
5. Never to misrepresent the NWC or the Craft of the Wise as being a parody of Christianity or any other religion; in any way connected with Satanism; or a political organization, public or clandestine, patriotic or subversive.

Being of sound mind, and without duress, I, having reached the age of \_\_\_\_\_ ( ) years, do swear to the above conditions, recognizing the POWER OF JUST RETRIBUTION, should I ever break this my solemn oath.

I fully recognize that signing this oath does not, in any way, obligate the New Wiccan Church, International to accept me for membership, nor does this oath in anyway obligate me to join the New Wiccan Church, International, should I withdraw from consideration for membership.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ (City),  
\_\_\_\_\_ (County), \_\_\_\_\_ (State/Province).

X \_\_\_\_\_  
(Signed, Legal Name) (Print Legal Name)

Witnessed By: (Signature) \_\_\_\_\_.



**New Wiccan Church, International  
Assumption of Risk, Hold Harmless Agreement,  
and Covenant Not to Sue**

(To be submitted with Application for Membership)

I, the undersigned, \_\_\_\_\_, duly sworn and under oath, do of my own free will and accord, without reservation, most solemnly state, swear and certify:

That I am of legal age and capacity, and that I am fully cognizant and aware of all risks of personal harm or injury inherent in my initiation and participation in the religion of Wicca and as a member of the New Wiccan Church, International;

That as a condition of membership of this Church I hereby fully assume to myself the risks of such harms or injuries to my person; that I do solely enter into such activities as a volunteer; and that I do hereby agree, warrant, and covenant to hold forever harmless from damages for personal harm or injury the New Wiccan Church, and/or any of its clergy, and/or any of its affiliates, and/or any of its chartered subsidiaries, and/or any of its officers and/or directors, and/or any of its members, and/or any of its authorized representatives.

That as a condition for membership in the New Wiccan Church I further hereby agree, warrant, and covenant not to sue or make claim against any of the aforementioned individuals, organizations, associations, or entities for redress of personal injury or damage.

That I thoroughly and completely understand the within and foregoing and do hereby affix my signature below as my free and voluntary act and deed for the expressed purpose contained within the foregoing document;

Dated This \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_

X \_\_\_\_\_

(Signature – legal name only)

(Print legal name)

\_\_\_\_\_  
(Street address, city, county, state/province, zip/postal code)

\_\_\_\_\_  
(Witness signature)

\_\_\_\_\_  
(Date)