

# MENTAL MEDIUMSHIP AFFIDAVIT



## National Spiritualist Association of Churches

What is the purpose of this affidavit? Those studying to become Certified Spiritualist Mediums, as part of their examination, need a number of affidavits from persons to whom they have brought an evidential spirit message. Your voluntary completion of this form can help the Medium obtain certification. More information below.

Name of Medium \_\_\_\_\_

Church name \_\_\_\_\_

Person receiving message \_\_\_\_\_

Address \_\_\_\_\_

City, state, zip \_\_\_\_\_

Date message received \_\_\_\_\_

Was a communicating spirit identified?  Yes  No

Was this spirit entity known to you?  Yes  No

Please explain:  
\_\_\_\_\_  
\_\_\_\_\_

Was the identity of the communicating spirit established beyond a reasonable doubt?  Yes  No

Check one or more of the following types of evidence received in the message concerning the communicating spirit:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> Name              | <input type="checkbox"/> Where lived     | <input type="checkbox"/> Relationship               | <input type="checkbox"/> Age              |
| <input type="checkbox"/> Description       | <input type="checkbox"/> Character       | <input type="checkbox"/> Personality                | <input type="checkbox"/> Health condition |
| <input type="checkbox"/> Method of passing | <input type="checkbox"/> Shared memories | <input type="checkbox"/> Knowledge of recent events |   |

Was a pertinent message received?  Yes  No

SIGNATURE *(sign in presence of witness)*

DATE SIGNED

Thank you for participating. Please return this form to the medium or a witness as soon as possible following the service.

**WITNESSES** By signing this affidavit, you certify that you have personally witnessed the Spirit Greeting demonstrated by the medium named above, and that it was in accord with NSAC standards. Witnesses may be any two of the following: Pastor or Pastoral Committee Member, Board Member, NSAC Missionary, or those holding this credential or higher.

WITNESS 1 *(signature and title)*

WITNESS 2 *(signature and title)*

### MORE INFORMATION

The Mediumship Affidavit is the only record of your spirit message maintained by NSAC. You may request a copy for your personal records. The affidavit will remain at the NSAC offices and will not be disclosed to anyone other than those charged by NSAC to verify your message for the sole purpose of determining the qualifications of the individual applying for NSAC certification as a Spiritualist Medium. You may obtain further information about mediumship affidavits and about NSAC's policies and practices regarding mediums by contacting the National Spiritualist Association of Churches, 13 Cottage Row, PO Box 217, Lily Dale, NY 14752 or [www.nsac.org](http://www.nsac.org).