

## THE ORDER OF THE DAUGHTERS OF THE HOLY CROSS

You will seek me and find me when you seek me with all your heart.

Jeremiah 29:13

## INTENT TO CREATE A CHAPTER

Prior to using the DHC Candidate Study Manual, a prospective member who plans to convene a group of women who are considering membership in The Order of the Daughters of the Holy Cross must submit this form. Upon receipt of this form, the Chapter Coordinator will designate a current member of the Order to serve as the study mentor for the group. [See Candidate Study Manual, page V for a description of the role of the study mentor.]

The Order of the Daughters of the Holy Cross requires its members to affirm and adhere to the following Faith Statement:

## **FAITH STATEMENT OF THE ORDER**

We believe and confess Jesus Christ to be the Way, the Truth, and the Life; no one comes to the Father but by Him. Therefore, The Order of the Daughters of the Holy Cross identifies the following four elements as essential for membership.

- 1. We confess the canonical books of the Old and New Testaments to be the inspired Word of God, containing all things necessary for salvation, and to be the final authority and unchangeable standard for Christian faith.
- 2. We confess Baptism and the Holy Eucharist to be Sacraments ordained by Christ Himself in the Gospel, and thus to be ministered with unfailing use of His words of institution and of the elements ordained by Him.
- 3. We confess as proved by most certain warrants of Holy Scripture the historic faith of the undivided church as declared in the three Catholic Creeds; the Apostles, the Nicene and the Athanasian.
- 4. We confess that the Holy Orders of Bishops, Priest and Deacons have been entrusted with safe-guarding the Church and the faith that was once for all entrusted to the saints.

Before submitting this form, you may wish to determine if the potential candidates and your clergy will be able to sign the membership application form that requires individual compliance with the above statement.

Date:			
Your Name:			
Address:			
City:	State:	Zip:	Phone:
Email:			_
Church Name:			
Address:			
City:	State:	Zip:	Phone:
Once all the information has been filled in, this fo Membership Chairperson at the address below.	orm should be printed (use	the print buttor	n at the top) and mailed to the
For Office Use Only	Date Recorded:		