

## HEALING AFFIDAVIT



### National Spiritualist Association of Churches

What is the purpose of this affidavit? Those studying to become Commissioned Spiritualist Healers, as part of their examination to become certified, need a number of affidavits from persons to whom they have brought healing. Your voluntary completion of this form can help your healer obtain the certification. More information below.

For those who received healing from the healing medium via social media such as zoom, for the absent healing understands that they may send an email to be attached to this affidavit for those who sent the healing either the healing medium or the one who is leading the healing meditation. You must include all the questions asked in the affidavit and your signature. It must be sent on the same day as the healing to the board/pastor/pastoral committee to sign.

*Name of Spiritual Healer*

*Church name*

*Person receiving Healing*

*Address*

*City, state, zip*

*Date of Spiritual Healing*

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#### HEALTH CONDITION

Please state briefly the physical condition which brought you to seek Spiritual Healing.

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#### RESULTS OF HEALING

Please explain how the physical condition was cured or relieved.

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SIGNATURE (sign in presence of witness)

DATE SIGNED

Thank you for participating. Please return this form to your healer or a witness as soon as possible following the healing.

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**WITNESSES** By signing this affidavit, you certify that you have personally witnessed or viewed via Social Media the Healing provided by the healer named above 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.

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WITNESS 1 (signature and title)

WITNESS 2 (signature and title)

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#### MORE INFORMATION

Your healing may reference a single visit to the healing chair or to a condition needing several visits.

The Healing Affidavit is the only record of your healing 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 healing for the sole purpose of determining the qualifications of the individual applying for NSAC commission as a Spiritualist Healer. You may obtain further information about healing affidavits and about NSAC's policies and practices regarding healing 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).