

O.R.P.I.T. Investigator Application

When filling out the form it must be emailed back to
investigations@orpit.org
Please delete the lines and fill in all information

Name: _____
Address: _____

Phone: _____
Email: _____

Birthday: _____
Age: _____
Sex: _____

Employer: _____
Address: _____

Phone: _____

Have you ever been charged with a criminal offence?

If yes what charges:

Were you found guilty or plead guilty:

Do you have a valid drivers license?

Why do you want to become a member of O.R.P.I.T.?

Do you have any experience in paranormal investigation? If yes what experience do you have.

What is your religious or spiritual background? (this does not effect our decision process.)

Have you belonged to any paranormal investigation group in the past?
_____ If yes what is the name of the group and contact information?

Please allow a few weeks for processing. Remember this is a volunteer organization and we need to get together to go over all applications. If you don't hear from us after two weeks email us to be sure we received the application.