

# 2016 CONGREGATIONAL LEADERSHIP FORM

Annual Meeting Date: \_\_\_\_\_

Congregation Name: \_\_\_\_\_ Conference: \_\_\_\_\_

Congregation Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Congregation Physical Address: (if different from above) \_\_\_\_\_

Church Phone: \_\_\_\_\_ Church Fax: \_\_\_\_\_ Church Email Address: \_\_\_\_\_

Church Web Site: \_\_\_\_\_

Pastor(s) Name(s): \_\_\_\_\_

Pastor(s) Email Addresses: (O) \_\_\_\_\_ (H) \_\_\_\_\_

Elections at the parish level should be reported to the ELCA on the proper forms. The synod office appreciates the names of key people from your congregation **as soon as they are available and whenever there is a change**. Please complete this form and return it to the synod office along with your *Statement of Intent*. If necessary, attach additional pages to complete.

## Congregational President

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

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

City, St, Zip: \_\_\_\_\_

Phone #'s: (H) \_\_\_\_\_ (W) \_\_\_\_\_

(C) \_\_\_\_\_

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

## Congregational Treasurer

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

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

City, St, Zip: \_\_\_\_\_

Phone #'s: (H) \_\_\_\_\_ (W) \_\_\_\_\_

(C) \_\_\_\_\_

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

## Youth Contact (adult)

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

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

City, St, Zip: \_\_\_\_\_

Phone #'s: (H) \_\_\_\_\_ (W) \_\_\_\_\_

(C) \_\_\_\_\_

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

## Education Contact

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

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

City, St, Zip: \_\_\_\_\_

Phone #'s: (H) \_\_\_\_\_ (W) \_\_\_\_\_

(C) \_\_\_\_\_

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

## Parish President

(if in parish agreement)

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

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

City, St, Zip: \_\_\_\_\_

Phone #'s: (H) \_\_\_\_\_ (W) \_\_\_\_\_

(C) \_\_\_\_\_

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



**South Dakota Synod**  
**Evangelical Lutheran**  
**Church in America**

God's work. Our hands.

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