

- Please report the leadership in your congregation by filling out this form and returning it to the NW MN Synod office by March 8.
- Primary communication for leadership is by ***email***. Any mail for church leadership will be sent to the church.
- **It is very important that we have complete information for each congregation in the Synod.**

A fillable online version of this form is also available on the Synod website at: www.nwmnsynod.org/pages/yearly-updates

Congregation _____ Congregation ID# _____

Mailing Address _____

City/State/ZIP _____

Physical Location of Congregation _____
(if different from mailing address)

Congregation Office Phone _____

Congregation Email Address _____

Congregation Website _____

If you are part of a multi-point parish, name of parish: _____

Church/Parish Leadership

Rostered Minister/SAM _____ Position _____

(if more than one rostered minister or SAM, please add additional names and contact information on the back of this form)

Home Mailing Address _____

City/State/ZIP _____

Home Phone _____ Cell Number _____

Preferred Email Address _____

Parish/Church Office Secretary _____

Preferred Phone Number _____

Preferred Email Address _____

Congregation President _____

Preferred Phone Number _____

Preferred Email Address _____

Council Treasurer _____

Preferred Phone Number _____

Preferred Email Address _____

Do you have any members from confirmation age—29 years old serving on your church council? _____

Yes No

Do you have a Foundation/Endowment? If yes, please complete contact information on the reverse.

Yes

No

OVER

Additional Leadership (including visitation, youth, etc.)

Rostered Minister/SAM _____ Position _____

Home Mailing Address _____

City/State/ZIP _____

Home Phone _____ Cell Number _____

Preferred Email Address _____

Rostered Minister/SAM _____ Position _____

Home Mailing Address _____

City/State/ZIP _____

Home Phone _____ Cell Number _____

Preferred Email Address _____

Lay Leadership (including youth, parish nurse, etc.)

Congregation WELCA Chair _____

Preferred Phone Number _____

Preferred Email Address _____

Name _____ Position _____

Preferred Phone Number _____

Preferred Email Address _____

Name _____ Position _____

Preferred Phone Number _____

Preferred Email Address _____

Name _____ Position _____

Preferred Phone Number _____

Preferred Email Address _____

Foundation/Endowment Contact Information

Name _____

Preferred Phone Number _____

Preferred Email Address _____

CHECKING HERE GIVES PERMISSION FOR ALL LEADERS LISTED TO RECEIVE THE SYNOD'S E-NEWS. _____

Thank You! Please return by March 8:

Joan Meulebroeck, Northwestern Minnesota Synod
Concordia College, Moorhead MN 56562

or

Email form to jmeulebroeck@cord.edu

or fax to 218-299-3363