

Name:				
Address:				
Phone: (	)		Email address:	

In relation to my withdrawal from the annual conference to unite with another denomination, I hereby authorize the Alabama-West Florida Conference to release the following information to the person listed below.

[ ] Date of Certified Candidacy

Date of License for Ministry

[ ] Date of Commissioning and Date of Ordination

[ ] Letter stating that the individual withdrew from membership (in good standing, if such is the case)

I also understand that this is all the information that the Alabama-West Florida Conference will release. Should the other denomination wish more information, I will inform them that all pertinent information has been released and that the Alabama-West Florida Conference holds all other information as confidential and will not release any items other than those listed above.

Details for the Person that should receive this information:

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

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

Name of Denomination:

Address to which the material should be sent if email is not an option:

Signature

Printed name

Date

Edited on 7-26-2022