

Substitute Annual Conference Membership Form

Name:			
Address:			
Phone: ()	Email address: _		
Current Appointmen	t:		
Current District:	[] Bay [] Dem [] Dot	t [] M/PC [] Mob [] MT-	-OP [] MT-PT [] PNS
Current Status:	[] Full Connection Elder	[] Full Connection Deacon	[] Associate Member
	[] Provisional Elder	[] Provisional Deacon	[] Local Pastor
Year of Ordination:			
full connection prior t Choose One: I hereby signif annual confer request that t I hereby signif am unable to	o 2005 will not be able to surre fy that I came into membership ence) prior to 2005. Therefore, his document be accepted in lie fy that I came into membership	when Certificates of Membershi efore cannot surrender the certifi	Membership. Conference (or another ship to surrender and p were issued, but that I
-		·	
Signature	Printed name	Date	
	Nota	ry Section:	
I hereby certify that a	all the information I have prov	vided is true and accurate. Subsc	cribed to and sworn
before me on this	date of	20	
Notary Signature			