Northeastern Minnesota Synod, ELCA

2019 CONGREGATIONAL INFORMATION

LISTING AN EMAIL INDICATES THAT THE INDIVIDUAL GIVES PERMISSION TO RECEIVE "ONLINE REFLECTIONS"

Church Name	Phone_		Cong. ID
Address		City	Zip
Email	Websit	e	
Congregational President: Mr./Mrs./Ms.			
Home Address		City	Zip
Daytime Phone	_ Email Address		
Congregational Treasurer: Mr./Mrs./Ms			
Home Address		_ City	Zip
Daytime Phone	_Email Address		
Hunger Contact: Mr./Mrs./Ms			
Home Address		_ City	Zip
Daytime Phone	Email Address		
Name and Email address for: <u>Church Secretary</u>			_
Parish Nurse			
Newsletter Editor/Webmaster			
Youth Director	(pastor, paid staff, _	volunteer, board chair)
Address**		Daytime phone	
City Zip		_Email**	

^{**} all synod youth information and gathering registration materials will be mailed to this name and address. Email address will be added to "Youth E-Chat" online newsletter. Additional names and addresses may be added to the back if necessary.