

Current Church Officers/Leaders for: \_\_\_\_\_  
 (Church Name)

Please print clearly. In order for us to serve and minister to your church, please provide a list of your church lay leaders below. Lay Leaders are leaders serving in the church other than your Professional Church Staff. They include the Church Secretary, Church Clerk, Church Treasurer, Deacon Chairperson or any other lay leader in your church. **Please provide complete information.** Especially home addresses and email addresses will be extremely helpful for us to keep in contact with our church leaders. These persons will be considered LAY PEOPLE and the positions will be considered VOLUNTEER unless otherwise indicated.

Name: _____ Home Address: _____ City & State: _____ Phone: _____ E-mail: _____ Position(s): _____	_____	<b>Circle all that apply:</b> Volunteer Paid PT Paid FT Lay Person Licensed Ordained	Name: _____ Home Address: _____ City & State: _____ Phone: _____ E-mail: _____ Position(s): _____	_____	<b>Circle all that apply:</b> Volunteer Paid PT Paid FT Lay Person Licensed Ordained
Name: _____ Home Address: _____ City & State: _____ Phone: _____ E-mail: _____ Position(s): _____	_____	<b>Circle all that apply:</b> Volunteer Paid PT Paid FT Lay Person Licensed Ordained	Name: _____ Home Address: _____ City & State: _____ Phone: _____ E-mail: _____ Position(s): _____	_____	<b>Circle all that apply:</b> Volunteer Paid PT Paid FT Lay Person Licensed Ordained
Name: _____ Home Address: _____ City & State: _____ Phone: _____ E-mail: _____ Position(s): _____	_____	<b>Circle all that apply:</b> Volunteer Paid PT Paid FT Lay Person Licensed Ordained	Name: _____ Home Address: _____ City & State: _____ Phone: _____ E-mail: _____ Position(s): _____	_____	<b>Circle all that apply:</b> Volunteer Paid PT Paid FT Lay Person Licensed Ordained
Name: _____ Home Address: _____ City & State: _____ Phone: _____ E-mail: _____ Position(s): _____	_____	<b>Circle all that apply:</b> Volunteer Paid PT Paid FT Lay Person Licensed Ordained	Name: _____ Home Address: _____ City & State: _____ Phone: _____ E-mail: _____ Position(s): _____	_____	<b>Circle all that apply:</b> Volunteer Paid PT Paid FT Lay Person Licensed Ordained
Name: _____ Home Address: _____ City & State: _____ Phone: _____ E-mail: _____ Position(s): _____	_____	<b>Circle all that apply:</b> Volunteer Paid PT Paid FT Lay Person Licensed Ordained	Name: _____ Home Address: _____ City & State: _____ Phone: _____ E-mail: _____ Position(s): _____	_____	<b>Circle all that apply:</b> Volunteer Paid PT Paid FT Lay Person Licensed Ordained