

2024/2025 LOCAL CHURCH LEADERS

(DO NOT FORGET TO COMPLETE THE CHURCH'S NAME AND PASTOR'S NAME)

THE LBA VICE CHAIR AND THE CHURCH TREASURER POSITIONS CANNOT BE LEFT BLANK

CHURCH:			PASTOR:		
*LBA VICE CHAIR			Head Trustee – LBA Member Y <input type="checkbox"/> N <input type="checkbox"/>		
Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Email:			Email:		
Cell:			Cell:		
*CHURCH TREASURER (if Business Mgr. please check <input type="checkbox"/>)			SS Superintendent/Spiritual Formation Director		
Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Email:			Email:		
Cell:			Cell:		
LBA SECRETARY (This is NOT Church Secretary or Admin)					
Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Email:			Email:		
Cell:			Cell:		
LBA MEMBER AT LARGE			LBA MEMBER AT LARGE		
Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Email:			Email:		
Cell:			Cell:		
LBA MEMBER AT LARGE			LBA MEMBER AT LARGE		
Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Email:			Email:		
Cell:			Cell:		
LBA MEMBER AT LARGE			LBA MEMBER AT LARGE		
Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Email:			Email:		
Cell:			Cell:		
LBA MEMBER AT LARGE			LBA MEMBER AT LARGE		
Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Email:			Email:		
Cell:			Cell:		
LBA MEMBER AT LARGE			LBA MEMBER AT LARGE		
Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip:
Email:			Email:		
Cell:			Cell:		

CHURCH LEADERS CONTINUED FOR: (CHURCH NAME):					
CHILDREN'S MINISTRY DIRECTOR			YOUTH / YOUNGADULT MINISTRY DIRECTOR		
Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip
Email:			Email:		
Cell:			Cell:		
WESLEYAN WOMEN DIRECTOR			WESLEYAN MEN DIRECTOR		
Name:			Name:		
Address:			Address:		
City:			City:		
Email:			Email:		
Cell:			Cell:		
SENIOR ADULT LEADER			LAY LEADER		
Name:			Name:		
Address:			Address:		
City:			City:		
Email:			Email:		
Cell:			Cell:		
WORSHIP LEADER:			OTHER LEADER:		
Name:			Name:		
Address:			Address:		
City:			City:		
Email:			Email:		
Cell:			Cell:		
OTHER LEADER:			OTHER LEADER:		
Name:			Name:		
Address:			Address:		
City:			City:		
Email:			Email:		
Cell:			Cell:		
DISTRICT CONFERENCE DELEGATES					
1.			3.		
2.			4.		
ALTERNATE DELEGATES					
1.			3.		
2.			4.		
LOCAL CHURCH MEMORIALS <i>(Those congregants who passed)</i>					
1.			8.		
2.			9.		
3.			10.		
4.			11.		
5.			12.		
6.			13.		
7.			14.		
rev 3.5.24					