Sierra Pacific Synod

Nomination Form

(Please Print or Type)

POSITION Synod Council TERM 2012-15

DISTRICT _____ CONFERENCE _____

_____ CLERGY _____ LAY FEMALE _____ LAY MALE _____ YOUTH

NAME _____ PHONE _____

ADDRESS _____

_____

E-MAIL ADDRESS _____

HOME CONGREGATION _____

CITY _____

Why I wish to serve: (50 words maximum)

If elected by the Synod Assembly to the above position, I am willing to serve.

_____ _____
Candidate's Signature Date

_____ _____
Dean's Signature Date

This form must be returned to the Synod Office by February 1, 2012, along with a wallet-size photograph which can be photocopied (electronic version OK). Mail to PO Box 276648, Sacramento, CA 95827-6648 or email to info@spselca.org.