

THE METROPOLITAN ASSOCIATION, NEW YORK CONFERENCE, UCC
FALL MEETING REGISTRATION FORM
November 11, 2017
at

The Congregational Church of South Hempstead, UCC
416 Woodland Drive, South Hempstead, NY 11550-7727

Church Name: _____

District: (Please indicate one)

___ Bronx ___ Brooklyn/Staten Island ___ Manhattan ___ Westchester
___ Nassau ___ Queens ___ Suffolk Association

Please be sure to include the name and contact information (email preferred) of each delegate along with their voting status.

Delegates: The Bylaws state that... *“Each church may be represented by its pastor or acting pastor and two lay delegates. Churches with more than 200 members may be represented by an additional lay delegate for each 200 members or major fraction thereof.”*

“...all ministerial members, officers of the Metropolitan Association and members of its Board of Directors and Committees shall have the right to vote.”

*Name: _____

Address: _____

*Email Address: _____

*Voting Status:

- D-DELEGATE
- M-MINISTERIAL OTHER THAN PASTOR
- MB-METRO BOARD OF DIRECTOR
- MC-METRO COMMITTEE MEMBER
- P- PASTOR
- V-VISITOR

***required**

*Name: _____

Address: _____

*Email Address: _____

*Voting Status:

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(Please list any additional delegates or attendees on a separate sheet with voting status)

Will you require child care? ___ Yes ___ No

If yes, please indicate age of each child (i.e. 1 yr old; 4 yr old) _____

Registration Information

Registration Fee: \$30.00 Adults; \$15.00 Youth (11-18 years); Retired Clergy – No Fee

Make Checks Payable and Mail to:

Metropolitan Association, 102-19 34th Avenue, 2nd Floor --- Corona, NY 11368

Total Amount Enclosed: \$ _____ for _____ people

Credit card payments through our secure service provider Vanco also available via tiny.cc/MetroNYPay

ADDITIONAL ATTENDEES – NOVEMBER 11, 2017, CONGREGATIONAL CHURCH OF SOUTH HEMPSTEAD

*Church Name: _____

*Name _____

Address _____

*Email _____

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