

2010 NORTHERN NEW ENGLAND DISTRICT CHARTER APPLICATIONS

January is the time to apply for or renew your Annual Women's Ministries membership.
Please fill this form out completely and send it with your \$5.00 application fee to the address below.
Thank you.

NAME OF CHURCH _____

Church City _____ Pastor _____

Rep's Name _____ Section _____

OFFICERS FOR YOUR GROUP

President/Leader _____

Address _____ City _____ St ____ Zip _____

Phone Number _____ Fax Number _____

Email Address _____

Vice President/ Co-Leader _____

Address _____ City _____ St ____ Zip _____

Phone Number _____ Fax Number _____

Email Address _____

Secretary _____

Address _____ City _____ St ____ Zip _____

Phone Number _____ Fax Number _____

Email Address _____

Treasurer _____

Address _____ City _____ St ____ Zip _____

Phone Number _____ Fax Number _____

Email Address _____

How many ladies attend your group? _____

Send completed form along
with \$5.00 to:
Women's Department
NNED
P. O. Box 611
Portland, ME 04104-0611

Have you adopted a missionary,
retired minister, or widow?
If so, who? _____

District Office Use
Ck # _____
Date Rcvd _____