

WISCONSIN B CHRISTIAN EDUCATORS FELLOWSHIP

2013-2014 MEMBERSHIP APPLICATION

Official Use Only:

Date Rec=d _____

Check# _____

Amount \$ _____

Name _____ BIRTHDAY ____ MONTH ____ DAY

*PLEASE * YOUR PREFERENCE FOR MAILING ADDRESS & PHONE NUMBERS*

__ CHURCH NAME _____

__ CHURCH ADDRESS _____ CITY/STATE/ZIP _____

__ CHURCH PHONE _____ FAX _____

__ CHURCH EMAIL _____

__ HOME ADDRESS _____ CITY/STATE/ZIP _____

__ HOME PHONE _____ CELL _____

__ HOME EMAIL _____

PLEASE CHECK ALL THAT APPLY TO YOU

National CEF Member? Yes _____ No _____ Denomination: UM _____ Other _____ Area(s) of responsibility: ___ Children ___ Youth ___ Young Adults ___ Adults	Current Status: ___ Ordained Elder ___ Ordained Deacon ___ Diaconal Minister ___ Certified Professional ___ Local Church Christian Educator ___ Church Volunteer ___ Retired ___ Other	Paid Staff or Volunteer? ___ Paid Staff ___ Volunteer Position Is this an ___ Individual or ___ Agency Membership <i>If you pay it personally, it is only for you. If the church pays, it is transferable during the year to another employee.</i>
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WHAT TALENT OR AREA OF EXPERTISE ARE YOU WILLING TO SHARE AS A PROGRAM? PLEASE INDICATE BELOW:

WHAT TYPES OF PROGRAMS WOULD YOU LIKE TO SEE WITHIN OUR WI-CEF CHAPTER?

MAKE CHECKS PAYABLE TO: WI-CEF

\$40.00 ANNUAL DUES for regular members

\$20.00 ANNUAL DUES for retired or disabled members

SEND FORM AND CHECK TO: LYNN BARBEAU, PORTAGE UMC

1804 NEW PINERY ROAD

PORTAGE, WI 53901

LYNETTE METZ (After September 12th)

W217N14185 Marquette Rd.

Richfield, WI 53706

Fees apply for July 2013-June 2014