

CERTIFICATION OF LAY DELEGATES AND ALTERNATES

Representing at the Diocesan Convention 2024

PLEASE COMPLETE THIS FORM AND SEND TO THE DIOCESE OF SOUTH DAKOTA

Church and Location: _____ # _____ (Church ID#)

**** If a delegate or alternate has no cell phone number nor an email address it is the responsibility of the clergy to make sure the people representing their Church receive all Diocesan Convention information.**

Under diocesan canon the figure for the number of lay delegates to which a church or chapel is entitled is based on average Sunday attendance as shown on the parochial report. Congregations whose parochial report calculates for one delegate are entitled to send two delegates. **Number of lay delegates to which entitled:** _____

Please indicate after their name if they are a delegate or an alternate. (D) or (A) Please list alternates in the order of their election. ie: Alternates: Jane Running Bear (1), Mark Doe (2), John Smith (3) List each delegate and alternate on separate lines. Be sure to include a current and full mailing address along with an email address or indicate if the person does not have email or a cell phone number.

Delegates or Alternates please indicate. (D) or (A)

1) Name: _____

Mailing address: _____

Email address: _____

Cell number: _____

2) Name: _____

Mailing address: _____

Email address: _____

Cell number: _____

3) Name: _____

Mailing address: _____

Email address: _____

Cell number: _____

The undersigned certifies that the above delegates and alternates were elected at a congregation meeting held on the _____ day of _____, 2024.

(Priest) or (Deacon) or (Warden)

Revised 12/2023

Delegates or Alternates please indicate. (D) or (A)

4) Name: _____

Mailing address: _____

Email address: _____

Cell number: _____

5) Name: _____

Mailing address: _____

Email address: _____

Cell number: _____

6) Name: _____

Mailing address: _____

Email address: _____

Cell number: _____

7) Name: _____

Mailing address: _____

Email address: _____

Cell number: _____

8) Name: _____

Mailing address: _____

Email address: _____

Cell number: _____