

## SOCIETY/QUARTERLY/ MAILING DIRECTORY INFORMATION

Dear 2009 Society President:

Please complete this information form for your **2010** society officers after your society's election. **Type or print in black ink.** This form must be completed by the outgoing president if she is different from the 2010 president. Complete information is required. **If any office listed is not an office in your society, please write none on the line.**

Each LWML member will receive a copy of the Quarterly and Echo without charge. You may request an additional complimentary copy of each publication for the pastoral advisor. (For churches with more than one pastor or society, this is one copy per congregation. This is one copy for the pastor of a dual parish.)

It is suggested that you make a contribution or pay for the Quarterlies/Echoes that you order. Send the money with this form and mark it Quarterly/Echo subscriptions.

You are encouraged to order the **Quarterly and Echo for non-LWML members in your congregation at a charge of \$7.00 for the combined subscription.** Make check payable to: LWML Nebraska District South, attach the check to this form and send it to your 2009 zone president.

Quarterlies and Echoes will be mailed to the church's address listed below. **IMPORTANT: Please include at least a three line mailing address and ZIP+4. Check with your 2010 officers to verify correct mailing address and e-mail addresses.** Your help is greatly appreciated. If you have questions, you may contact the Vice President of Communications: **Elinor Kuehner**, 402-756-3703, E-mail; [erkk@gtmc.net](mailto:erkk@gtmc.net)

Send BOTH copies to your 2009 zone president no later than November 15, 2009.

**Society Name:** \_\_\_\_\_ **Zone:** \_\_\_\_\_

**Number of Members:** \_\_\_\_\_ **Number of Quarterlies/Echoes:** \_\_\_\_\_

**Church Name:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, Zip+4: \_\_\_\_\_ Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Pastor:** \_\_\_\_\_ **Spouse's Name:** \_\_\_\_\_

Home Mailing Address: \_\_\_\_\_

City, Zip+4 \_\_\_\_\_ Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**President:** \_\_\_\_\_ **Spouse's Name:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, Zip+4 \_\_\_\_\_ Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Does the President hold a Zone or District elected or appointed office? If so what is it?

Is the President willing to receive information by e-mail and make it available to the members of the society? If not, please give the name and e-mail address of someone in the society who is willing to receiving these mailings.

Please complete the information for additional officers in your society and list any other officers which should be places in the directory.

**V.President/Pres.-Elect:** \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, Zip+4 \_\_\_\_\_ Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Secretary:** \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, Zip+4 \_\_\_\_\_ Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Treasurer:** \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, Zip+4 \_\_\_\_\_ Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### **Christian Life**

**Chairman:** \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, Zip+4 \_\_\_\_\_ Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### **Leader Development**

**Chairman:** \_\_\_\_\_ Spouse's Name \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, Zip+4 \_\_\_\_\_ Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### **Human Care**

**Chairman:** \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, Zip+4 \_\_\_\_\_ Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Archivist:** \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, Zip+4 \_\_\_\_\_ Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_