



NORTH CAROLINA WEST DISTRICT

LBA Members 2009-2010

Church Name: _____ Date Submitted: _____

Please fill out the addresses completely. Include the zip code and a box number if they live on a rural route.

VICE-CHAIR

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

CHURCH SECRETARY

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

CHURCH TREASURER

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

SUNDAY SCHOOL SUPERINTENDENT

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

YOUTH LEADER OR SPONSOR

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

SOCIAL CONCERNS DIRECTOR

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

WESLEYAN MEN PRESIDENT

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

WESLEYAN WOMEN PRESIDENT

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

MEMBERS-AT-LARGE

(Please include trustees who are LBA members)

1. Name: _____

Address: _____

City/State/Zip: _____

2. Name: _____

Address: _____

City/State/Zip: _____

3. Name: _____

Address: _____

City/State/Zip: _____

4. Name: _____

Address: _____

City/State/Zip: _____

5. Name: _____

Address: _____

City/State/Zip: _____

6. Name: _____

Address: _____

City/State/Zip: _____

7. Name: _____

Address: _____

City/State/Zip: _____

8. Name: _____

Address: _____

City/State/Zip: _____

9. Name: _____

Address: _____

City/State/Zip: _____