

Application for Acceptance Into
The CT District Lay Speaking Ministries Basic Class of 2009
To be Held at
First United Methodist Church
188 Rocky Rest Road Shelton, CT 06484

Class Schedule for 2009

All Classes 8:30-3:45

1st Class Sat, Sept. 19 - 2nd Class Sat, Sept 26
3rd Class Sat, Oct. 3 - 4th Class Sat, Oct. 17
5th Class Sat, Oct 31 - 6th Class Sat, Nov 7
** Bring your Lunch or Donate \$5 for Pizza & Salad **

Name _____

Address _____

City/Town _____ Zip _____

Phone Nr. _____ Cell Nr. _____

Email Address _____

(Please print clearly)

Your Church _____

Address of Church _____

City/Town _____

I desire to make the commitment to serve, with required study, as a Local Lay Speaker in the United Methodist Church. I have read Paragraphs @266- #268 in the "United Methodist Book of Discipline 2004" concerning the office of Lay Speaking, and realize that there are a variety of ways in which I may serve. I will complete the basic training necessary for certification, and I have obtained the required recommendations as indicated below.

I understand that I may be photographed, video taped or otherwise my likeness may be captured during the time I am involved in Lay Speaking Ministries classes, events, activities. I grant, without limitation, the right to use my name, likeness, image, voice, appearance, and performance in publications and presentations. Further, I acknowledge that I have no interest or ownership in resulting products or copyrights.

Signature of Applicant

Date

RECOMMENDATIONS

Signature of Pastor

Date

Signature of Chairperson Admin. Board/Church Council/Charge Conference

Date

**Complete and mail this form by September 12, 2009 with a fee of \$35 to
The CT District Office 20 Broadfield Road Hamden, CT 06517 Attn: Dorothy
Make Checks Payable To: CT District Lay Speaking Ministries**

Please call Mary Brevigleiri 860-307-4611 if you have any questions