



Annual Membership Reconfirmation
for Member Ministries

According to our Bylaws, each member shall be asked to reaffirm their membership once a year.

Return the completed form by August 15, 2017, to Cindi Cousineau, Admin. Asst. GLURC, P.O.Box 162, Greenville, WI 54944
or email to GLURCadmin@GreatLakesUnity.com.

Article III - Membershp; Section 2 - Term of Membership.

A member shall retain membership until said member releases membership voluntarily or no longer meets the qualifications
for membership as described in these Bylaws.

2.1 Response Card. Each year, notification of the annual business meeting shall include a response card allowing members
to indicate an intention to re-affirm membership in the Great Lakes Unity Region or voluntarily release their membership.

2.2 Contact Information. The response card will show the member's current contact information and allow an opportunity
for the member to update this information.

2.3 Lay Delegates. For member ministries, the repsonse card will show the names of the ministry's current lay delegates
and allow the ministry to update this information.

2.4 Non-Response. Non-response is considered equivalent to releasing membership voluntarily. If no response is
received from a member within thirty (30) days, an attempt will be made to contact the member before the member is made inactive.

2.5 Reactivation of Membership. An inactive member may re-activate their membership provided they meet the qualifications
for membership as described in these Bylaws, by submitting a written request to the President of the corporation. This request
may be submitted by email or US mail. The request must include current contact information and, for a member ministry, a list
of lay delegates for that ministry.

- checkbox We wish to reconfirm our membership the UWM Great Lakes Region.
checkbox We voluntarily release our membership in the UWM Great Lakes Region.

We wish to designate the following Lay Delegates (optional - up to three):

Name: _____ Email: _____
Name: _____ Email: _____
Name: _____ Email: _____

Signing on behalf of the ministry:

Print: _____ Title: _____
Signature: _____ Date: _____

Verify the following information:

Enter any corrections/updates:

Ministry Name:
Mailing Address:
Meeting Address:
Phone Numbers: Church
Church Fax
MinisterOffc
E-Mail:
Website:
Led by:

If "other"
specify: _____

Name(s): _____

GLR office use:

Church/Center