

2020 Parish Information Forms

Please complete and submit to the Synod Office within three weeks of your Parish Annual Meeting, as specified in Canon 35 – **by March 31, 2020** at the very latest.

Mail to: **Janice Roby, 1340 Cathedral Lane, Halifax, NS B3H 2Z1**

Email to: jroby@nspeidiocese.ca

<u>PARISH Name:</u>	<u>REGION #</u>	<u>PARISH #</u>

Parish Mailing Address (including postal code):	
Civic Address:	
Parish Office phone number:	Parish Office fax number:
Parish e-mail Address:	Parish web site, blog, Twitter or Facebook page(s):
Office Administrator/Secretary (if applicable)	

for multi-point parishes please list all locations: (Were any of your churches deconsecrated in 2019? – please list and flag as deconsecrated)

Church Name(s) & Civic Address(es):

Status: [please underline one]

Rector/ Priest-in-Charge:		Full-time Part-time

Name(s) of other ordained person(s) in the parish: Status: [please underline one]

	CAPP Deacon Honorary License Retired
	CAPP Deacon Honorary License Retired
	CAPP Deacon Honorary License Retired
	CAPP Deacon Honorary License Retired

Region #: _____; **Parish #:** _____; **Parish Name:** _____

Parish Wardens: (two; third optional)

Please mark box if this person is a Regional Council Member: ▼

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Parish Treasurer:

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Parish Council Secretary:

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Region #: _____; **Parish #:** _____; **Parish Name:** _____

Parish Council Members-at-Large:

Please mark box if this person is a Regional Council Member: ▼

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Region #: _____; Parish #: _____; Parish Name: _____

Please mark box if this person is a Regional Council Member: ▼

Name:	
Address (including postal code):	
<input type="checkbox"/>	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code):	
<input type="checkbox"/>	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code):	
<input type="checkbox"/>	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code):	
<input type="checkbox"/>	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code):	
<input type="checkbox"/>	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Region #: _____; Parish #: _____; Parish Name: _____

Additional Regional Council Members (not listed on previous pages):

Name:	
Address (including postal code): <input type="checkbox"/>	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code): <input type="checkbox"/>	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code): <input type="checkbox"/>	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code): <input type="checkbox"/>	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Name:	
Address (including postal code): <input type="checkbox"/>	
Home Telephone:	Work Telephone:
E-mail:	Cell:

Date of Annual Meeting at which all of the above were elected: _____

Region #: _____; Parish #: _____; Parish Name: _____

IMPORTANT INFORMATION REGARDING SYNOD DELEGATES

Following the resignation of Archbishop Cutler as Diocesan Bishop, the February 2020 meeting of Diocesan Council will establish a date for an Electoral Synod.

As per Canon 1 ***Election, Appointment, Consecration and Resignation of Bishops***, Section 1(g), and “electoral synod” is a special meeting of Synod called for the purpose of electing a bishop.

This means that Parishes only need to elect new Lay and Youth Synod delegates(s) and Alternates at their AGM in 2010 if current Synod members are unable to serve.

The attached Certificate of Election must be completed if new Delegates and/or Alternates are elected. The Certificate must be received by the Synod Office no later than Tuesday, March 31, 2020.

At an Electoral Synod, all licensed clergy are eligible to vote. Licensed clergy includes Rectors, Priests—in-Charge, Assistant and Associate Priests, and Licensed Honorary Assistants. This does not include clergy holding a “*Permission to Officiate*” document.

In April, a **Synod Registration Form** will be sent to each Parish to confirm the names of all those eligible to vote at the Electoral Synod.

If, at any time prior to the election, a Lay or Youth delegate is no longer able to serve, a named Alternate may take his or her place, upon written notice to the Executive Secretary of Synod, c/o Jan Connors: jconnors@nspeidiocese.ca or mailed to 1340 Cathedral Lane, Halifax, NS B3H 2Z1, or faxed to 902 425 0717.

Region #: _____; Parish #: _____ Name: _____



ELECTORAL SYNOD 2020 CERTIFICATE of ELECTION

Parish Name & Location:

Region:

Parish Number: _____

TO BE COMPLETED IF ANY OF THE LAY OR YOUTH MEMBERS OF THE 2019 DIOCESAN SYNOD ARE UNABLE TO SERVE AT THE UPCOMING SPECIAL MEETING OF SYNOD TO ELECT A COAJUTOR BISHOP – Date of Electoral Synod to be determined by Diocesan Council at the February 7-8, 2020 meeting.

DEADLINE: Tuesday, March 31, 2020

⇒ Email: jconnors@nspeidiocese.ca (send scanned attachment including signature and date)

⇒ Fax: 902-425-0717

⇒ Mail: Diocese of NS and PEI

Attn: Jan Connors

1340 Cathedral Lane, Halifax, NS B3H 2Z1

LAY REPRESENTATIVES TO SYNOD

Qualifications: Constitution Sections 5 and Section 6

Section 5(2): Each lay representative shall be a communicant of a congregation that forms part of a Parish who attends worship services regularly and is of the full age of 16 years before his or her election or appointment and who is also qualified to vote at meetings of the Parish he or she is to represent.

Section 6(2): Each youth delegate shall be a communicant and regular attender who will be at least sixteen years of age upon the opening of Synod and under the age of twenty-five years upon the conclusion of Synod and who is also qualified to vote at meetings of the pastoral unit he or she is to represent.

Number of Lay Representatives:

Section 5 (1) Number: Each Parish may elect or appoint two lay representatives.

Section 6 (1) Number: Each Parish may elect or appoint one youth delegate.

Please print or write clearly. Please do not leave email blank unless the delegate has no email.

Lay Delegate Name: _____
Email: _____
Address: _____, City/Town _____ Postal Code _____
Telephone Numbers: (902) _____ (home); (902) _____ (work); (902) _____ (cell)

Lay Delegate Name: _____
Email: _____
Address: _____, City/Town _____ Postal Code _____
Telephone Numbers: (902) _____ (home); (902) _____ (work); (902) _____ (cell)

Youth Delegate Name: _____
Email: _____
Address: _____, City/Town _____ Postal Code _____
Telephone Numbers: (902) _____ (home); (902) _____ (work); (902) _____ (cell)
Birth Date: (absolutely required for youth delegate) _____

Region #: _____; Parish #: _____; Parish Name: _____

Alternates: Constitution Section 5 (5)

Each Parish may elect or appoint an alternate for each lay representative or youth delegate elected or appointed.

ALTERNATE Lay Delegate Name: _____

Email: _____

Address: _____, City/Town _____ Postal Code _____

Telephone Numbers: (902) _____ (home); (902) _____ (work); (902) _____ (cell)

ALTERNATE Lay Delegate Name: _____

Email: _____

Address: _____, City/Town _____ Postal Code _____

Telephone Numbers: (902) _____ (home); (902) _____ (work); (902) _____ (cell)

ALTERNATE Youth Delegate Name: _____

Email: _____

Address: _____, City/Town _____ Postal Code _____

Telephone Numbers: (902) _____ (home); (902) _____ (work); (902) _____ (cell)

Birth Date: (absolutely required for alternate youth delegate)

** _____

CERTIFICATION:

Signature of Rector/Priest-in-Charge/Incumbent

Date signed

Region #: _____; **Parish #:** _____; **Parish Name:** _____

Region #: _____; Parish #: _____; Parish Name: _____

2020 Licensed Lay Ministers' Association

Canon 27, with reference to the handbook, requires our Association to maintain a list of currently active Lay Readers in our Diocese. This list is the only one maintained and is used for many Diocesan and National Church purposes.

PLEASE make cheque payable to the **Diocesan Lay Readers' Association**.

Total Annual Fee Paid: \$_____

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:
Please Circle: Lay Reader Lay Reader in Training	
\$15 Annual Fee	

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:
Please Circle: Lay Reader Lay Reader in Training	
\$15 Annual Fee	

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:
Please Circle: Lay Reader Lay Reader in Training	
\$15 Annual Fee	

Region #: _____; Parish #: _____; Parish Name: _____

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:
Please Circle: Lay Reader Lay Reader in Training	
\$15 Annual Fee	

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:
Please Circle: Lay Reader Lay Reader in Training	
\$15 Annual Fee	

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:
Please Circle: Lay Reader Lay Reader in Training	
\$15 Annual Fee	

Name:	
Address (including postal code):	
Home Telephone:	Work Telephone:
E-mail:	Cell:
Please Circle: Lay Reader Lay Reader in Training	
\$15 Annual Fee	

Please make cheque payable to:

Diocesan Licensed Lay Ministers' Association

and mail cheque to:

**Wayne Hamlin, Treasurer
Licensed Lay Ministers' Association
28 Overlook Road
Kentville, NS B4N 2P4**