2020 ZONE MEMBERSHIP REPORT

LUTHERAN WOMEN'S MISSIONARY LEAGUE TEXAS DISTRICT

_____**Zone**

Zone President
Name_____
Address_____
City & Zip_____
Phone(jll_____) _____
Email _____

Zone Pastoral Counselor
Name_____
Address_____
City & Zip_____
Phone(_____) _____
Email _____

Zone Christian Life (Christian Growth)
Name_____
Address_____
City & Zip_____
Phone(_____) _____
Email _____

Zone Young Woman Representative
Name_____
Address_____
City & Zip_____
Phone(_____) _____
Email _____

Zone Human Care (Mission Service)
Name_____
Address_____
City & Zip_____
Phone(_____) _____
Email _____

Zone Young Woman Representative
Name_____
Address_____
City & Zip_____
Phone(_____) _____
Email _____

Zone Leader (Member) Development
Name_____
Address_____
City & Zip_____
Phone(_____) _____
Email _____

Zone Treasurer
Name_____
Address_____
City & Zip_____
Phone(_____) _____
Email _____

Attach additional sheet if more space is needed for any item below.

Name(s) of any society (include city and church) that became supporting (inactive or disbanded) in 2019 (include brief statement explaining why):

_____

_____

Zone Activities held in 2019 –

Number of Rallies _____ Total attendance at all Rallies _____
Number of Workshops _____ Total attendance at all Workshops _____
Number of Retreats _____ Total attendance at all Retreats _____
Other Event(s)

_____ Attendance _____
(indicate name/type of event)

Total number of members in zone _____
(including Individual Members)

_____
Zone President's Signature

Zone President: After verifying addresses, especially e-mail addresses, send this completed form, along with all completed 2020 Society Membership Reports, 2020 Individual Membership Forms, and all payments by November 1, 2019 to:

Nancy Beckcom, VP of Organizational Resources
2238 Earle Street *Home Phone: (409) 749-4807*
Port Neches, TX 77651 *Email: organizationalresources@lwmltxdist.org*

Keep a copy of this completed form for your files.