

Lighthouse Leadership Team Change of Information Form

This form is for computer use; or, print out to fill in by hand.

## Aglow Lighthouse       Aglow ID #       EIN #

## Area Team       Date

**Community**  **Neighborhood  Couples**  **Workplace**

# IMPORTANT: Please help us keep our records current by filling out this form *every time* there is a change of office/information, making sure each officer’s name on your leadership team is listed. An office left blank should mean there is no officer filling that position. A new officer should have all the information filled in and a copy of their approved Leadership Questionnaire should be included. Thank you!

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| **PRESIDENT / FACILITATOR**  Name  Address  City, State       Zip  Home Phone       Cell Phone  Email  Denomination  New Officer  New Address  New Phone  New E-Mail | **VP MINISTRY DEV. / CO-FACILITATOR**  Name  Address  City, State       Zip  Home Phone       Cell Phone  Email  Denomination  New Officer  New Address  New Phone  New E-Mail |
| **VICE-PRESIDENT OF ADMINISTRATION**  Name  Address  City, State       Zip  Home Phone       Cell Phone  Email  Denomination  New Officer  New Address  New Phone  New E-Mail | **VICE-PRESIDENT OF PUBLIC RELATIONS**  Name  Address  City, State       Zip  Home Phone       Cell Phone  Email  Denomination  New Officer  New Address  New Phone  New E-Mail |
| **VICE-PRESIDENT OF FINANCIAL DEVELOPMENT**  Name  Address  City, State       Zip  Home Phone       Cell Phone  Email  Denomination  New Officer  New Address  New Phone  New E-Mail | **MEETING INFORMATION**  Meeting Place  Physical Address  City, State       Zip  Day of Week       Time  Check week of month:  1 2 3 4  Lighthouse web site address: |