



## 2025 Synod Assembly Registration Worksheet

Use this worksheet to gather information from your congregation's **voting members** to then be entered into the online registration. Visitors will register individually.

**All registration is done online only. Please do not send this form to the synod office.**

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*For voting member registration, all fields are required.*

Congregation: \_\_\_\_\_ How many voting members? \_\_\_\_\_

How are you planning to pay for registration?  Online  Mailed Check  
Credit Card or ACH

\* If you are registering your congregation but you are not a voting member yourself you will be asked for your contact information.

### Voting Member #1 (Primary)

Name: \_\_\_\_\_

Role:  Rostered Minister  Lay Voting Member

Pronouns: \_\_\_\_\_  Youth/Young Adult (under 30)

Email Address: \_\_\_\_\_

Dietary Needs?  Vegetarian  Gluten Free  Vegan  
 Nut Allergy  Other: \_\_\_\_\_

### Voting Member #2

Name: \_\_\_\_\_

Role:  Rostered Minister  Lay Voting Member

Pronouns: \_\_\_\_\_  Youth/Young Adult (under 30)

Email Address: \_\_\_\_\_

Dietary Needs?  Vegetarian  Gluten Free  Vegan  
 Nut Allergy  Other: \_\_\_\_\_



Voting Member # \_\_\_ (If Applicable)

Name: \_\_\_\_\_

Role: \_\_\_ Rostered Minister                      \_\_\_ Lay Voting Member

Pronouns: \_\_\_\_\_                      \_\_\_ Youth/Young Adult (under 30)

Email Address: \_\_\_\_\_

Dietary Needs?    \_\_\_ Vegetarian            \_\_\_ Gluten Free            \_\_\_ Vegan  
                             \_\_\_ Nut Allergy            \_\_\_ Other: \_\_\_\_\_

Voting Member # \_\_\_ (If Applicable)

Name: \_\_\_\_\_

Role: \_\_\_ Rostered Minister                      \_\_\_ Lay Voting Member

Pronouns: \_\_\_\_\_                      \_\_\_ Youth/Young Adult (under 30)

Email Address: \_\_\_\_\_

Dietary Needs?    \_\_\_ Vegetarian            \_\_\_ Gluten Free            \_\_\_ Vegan  
                             \_\_\_ Nut Allergy            \_\_\_ Other: \_\_\_\_\_

Voting Member # \_\_\_ (If Applicable)

Name: \_\_\_\_\_

Role: \_\_\_ Rostered Minister                      \_\_\_ Lay Voting Member

Pronouns: \_\_\_\_\_                      \_\_\_ Youth/Young Adult (under 30)

Email Address: \_\_\_\_\_

Dietary Needs?    \_\_\_ Vegetarian            \_\_\_ Gluten Free            \_\_\_ Vegan  
                             \_\_\_ Nut Allergy            \_\_\_ Other: \_\_\_\_\_