

Retired Clergy
2017 Informational Review

Please return this form no later than April 1, 2017.

Return to: Central Southeast Ohio Association, 6161 Busch Blvd., Suite 100 Columbus, Ohio 43229

1. Name: _____

2. Home Address: _____

City: _____ State: _____ Zip _____

Home Phone: _____

Home E-mail: _____

Cell Phone: _____ Permission to publish cell phone number? Yes ___ No ___

FAX number: _____

3. Member of which UCC Church: _____

4. Date of Ordination: _____

General comments and updates...your activities, health, any news and when possible travel tips.....

Supply Preaching

_____ I am interested and can travel _____ Miles one-way from home

Would you like to be added to our Supply Preaching List Yes ___ No ___ Not interested ___

Collegial Support

Are you part of a collegial support/peer group? Yes No

If you are part of a collegial support/peer group, how often do you meet?

Describe the nature of your collegial support/peer group