

# Delegate Credential Form

## 202%Advent Christian General Conference Triennial Convention

This is to certify that the following named persons  
have been duly elected/appointed to represent:

\_\_\_\_\_

Name of Church, Conference or Associate

Signature: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_

### List Delegates Below (Please type or print)

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

Ordained/Licensed Minister

Lay Person

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Ordained/Licensed Minister

Lay Person

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Ordained/Licensed Minister

Lay Person

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Ordained/Licensed Minister

Lay Person

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Ordained/Licensed Minister

Lay Person

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Ordained/Licensed Minister

Lay Person

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Do not write in this space – For use of Credentials Committee.