

ASTORIA

COMMUNITY CHURCH

Church Leader Nomination Form

Elder Nominees

1. _____
2. _____
3. _____
4. _____

Deacon Nominees

1. _____
2. _____
3. _____
4. _____

Deaconess Nominees

1. _____
2. _____
3. _____
4. _____

I am a member of ACC, I have spoken with the above person(s) and confirmed that they are members of ACC and have agreed to being nominated.

Print Name

Signature and Date

Please complete and email, mail or hand to Pastor Jim at jim@astoriachurch.org

P.O. Box 2102 Astoria, NY 11102