

FOR OFFICE USE

CHARTER NO. \_\_\_\_\_  
DATE RECEIVED \_\_\_\_\_  
REPLY \_\_\_\_\_

**2012**  
**NORTH CAROLINA MEN IN MISSION**

**APPLICATION FOR CHARTER**

**ENCLOSED IS OUR CHECK FOR \$ \_\_\_\_\_ IN SUPPORT OF OUR  
MINISTRIES FOR 2012. (\$100.00 minimum requested)**

**CONGREGATION:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**CONFERENCE:** \_\_\_\_\_

**PRESIDENT OF LUTHERAN MEN IN MISSION**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **e-mail** \_\_\_\_\_

**Please list all of your other officers names, addresses, etc. on the back of this form.**

**MAKE CHECK PAYABLE TO:**

**NORTH CAROLINA LUTHERAN MEN IN MISSION  
1988 LUTHERAN SYNOD DRIVE  
SALISBURY, NC 28144**

**If you do not have a Lutheran Men's Unit, please send us the name of the Vice-Chairman of your congregation.**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**If this is the first year that you have chartered and you are being sponsored by another Lutheran Men's group, what is the name of that sponsoring group.**