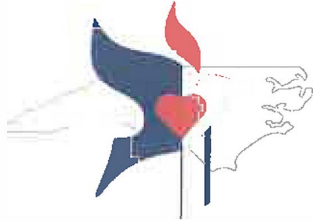


**NORTH CAROLINA
LUTHERAN MEN IN MISSION**



2019

FOR OFFICE USE

CHARTER NO. _____
DATE RECEIVED _____
REPLY _____

NORTH CAROLINA LUTHERAN MEN IN MISSION

APPLICATION FOR CHARTER

ENCLOSED IS OUR CHECK FOR \$ _____ IN SUPPORT OF OUR
(\$ 100.00 Minimum requested)

MINISTRIES FOR 2019.

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: _____

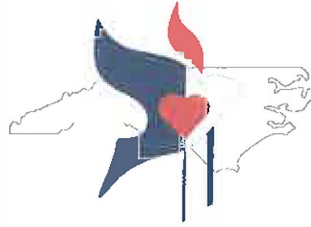
CITY: _____ **ZIP:** _____

If this is the first year that you have sponsored by another Lutheran Men's sponsoring group?

**NORTH CAROLINA
LUTHERAN MEN IN MISSION**

chartered and you are being group, what is the name of that

**North Carolina Lutheran
EXTRA MILER**



Men in Mission

2019

I want to support the work of NCLMM as we strive to help men continue to grow in Christ, have a better understanding of what is expected of us here on earth, and help to expand His church in North Carolina by supporting the Loan and Gift Fund of NCLMM.

I am willing to go the "Extra Mile" by making a contribution annually to this fund.

Annual Contribution:

_____ \$ 100 (minimum)

_____ \$ 250

_____ \$ 500

_____ \$1,000

_____ OTHER \$ _____

DATE: _____

NAME: _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE: _____

E-MAIL ADDRESS: _____

Congregation: _____ Conference: _____

Please mark your check as "Extra Miler" and mail to:

NCLMM, 1988 LUTHERAN SYNOD DRIVE, SALISBURY, N. C. 28144

North Carolina Lutheran Men in Mission

**NOMINATION FOR HONORARY/MEMORIAL
LIFE MEMBERSHIP**

Sponsor: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____ Phone No.: _____

Nominee is to be: Honored : _____ Memorialized: _____

Name: _____

Address: _____

Church: _____

Wife's Name: _____

Children's Name(s): _____

Grandchildren: _____

Do you desire a representative from NCLMM to make this presentation?

Yes _____ No _____

Date and place for presentation: _____

Military Service (show branch, rank, awards, years of service, etc.)

Civic clubs and community activities – if any

Church offices held, Committee involvement, Synod delegate, etc.:

(over)

(Church offices
continued)

Lutheran Men in Mission activities on the local, state, and/or national level. (Please be specific in identifying the activity, length of service, etc.)

Signed: _____
(Pastor)

Signed: _____
(President of LMM Group)

PLEASE MAIL THIS APPLICATION AND A CHECK FOR \$ 100.00 (MINIMUM) TO:

NORTH CAROLINA LUTHERAN MEN IN MISSION
1988 Lutheran Synod Drive
Salisbury, NC 28144

North Carolina Lutheran Men in Mission
Application For
JOHN W. COBB UNIT ACHIEVEMENT A WARD
2019

PURPOSE: To recognize those local **LMM** units of the North Carolina Synod who have achieved an active program of men's ministry based on criteria as outlined in the application form.

INSTRUCTIONS: Complete the following application and send to: **NCLMM** 1988 Lutheran Synod Drive, Salisbury, NC 28144. Applications must be received by March 31, 2019 for recognition at the State Gathering in May 2019.

NAME OF CONGREGATION: _____

ADDRESS: _____

CITY, AND ZIP: _____

UNIT PRESIDENT/CONTACT: _____

PASTOR: _____

MINIMUM CRITERIA FOR RECOGNITION

- 1) Unit charter is current. Yes___ No___
- 2) Men of the congregation have been made aware of the mission of NCLMM and church-wide LMM (Bulletins, letters, meetings, etc.). Yes___ No___
- 3) A special meeting or event inviting young men (35 years or younger) to become actively involved in Lutheran Men in Mission. Yes___ No___
- 4) A special meeting or event that involves the youth of the congregation (Father/son/daughter banquet; LYO: Students, etc.). Yes___ No___
- 5) Provide leadership for Lutheran Men in Mission Sunday during worship service complete with bulletin inserts and All Cause envelopes. Yes___ No___
- 6) Conduct at least 10 "regular" meetings, of which at least three have a Bible study theme. Yes___ No___
- 7) Award at least one Honorary Life or Memorial Life membership with presentation made at worship service or event involving entire congregation. (Please indicate number presented ___-__-.) Yes___ No___

8) Local Unit was represented at all "special meetings" as follows:

Conference Meetings (If Conference is organized) Yes___ No___
State Convention Yes___ No___

9) Local Unit made contributions to:

Disaster and Relief (Amount: _____) Yes___ No___
ELCA LMM (Master Builders) (Amount: _____) Yes___ No___
Loan and Gift Fund (Amount: _____) Yes___ No___
National LMM Endowment Fund (Amount: _____) Yes___ No___
Operation and Promotion (Amount: _____) Yes___ No___
Carl E. Webb Memorial Devotional Fund (Amount: _____) Yes___ No___
Walter Yount Retreat Lodge -Camp Agape (Amount: _____) Yes___ No___
\$ 75,000.00 Challenge (Amount: _____) Yes___ No___

(NOTE: A MINIMUM CONTRIBUTION OF AT LEAST \$50.00 TO EACH FUND SHOWN ABOVE IS REQUIRED TO QUALIFY FOR THIS AWARD.)

10) Sponsor a special project within the church and/or community which provided opportunity for outreach. Yes___ No___
Provide brief description:

11) If applicable, loan payments to Home Mission Foundation are current. Yes___ No___

SIGNATURE OF LOCAL UNIT PRESIDENT/CONTACT: _____
DATE SUBMITTED: _____

SIGNATURE OF PASTOR: _____
DATE SUBMITTED: _____

(TO EARN THIS AWARD ALL REQUIREMENTS MUST BE MET)