New Beginnings Partnership Conference Application

Conference Name: ______________________________________________________

Contact Information for New Beginnings Conference Coordinator:

Name: ________________________________________________________________

Role/Position: __________________________________________________________

Email Address: __________________________________________________________

Phone Number(s): _______________________________________________________

A Conference’s role in the New Beginnings timeline typically lasts approximately 15 weeks. For example:

Week 1: “Come and See” (a promotional workshop for church leaders)
Week 5: Deadline for Churches to submit NB Request Form
Week 10: Assessment Visits to Congregations
Week 15: “Cluster Event” Weekend Training for Church Leaders

Our Conference wishes to BEGIN the New Beginnings process in:

___ 1st Qtr 2016 ___ 2nd Qtr 2016 ___ 3rd Qtr 2016 ___ 4th Qtr 2016

___ 1st Qtr 2017 ___ 2nd Qtr 2017 ___ 3rd Qtr 2017 ___ 4th Qtr 2017

We will make every effort to accommodate this schedule, but may ask you to be flexible in high-demand seasons.

Our Conference anticipates the participation of ________ congregations.

Conference Representative Signature: _________________________________ Date: __________

Printed Name: __________________________________________________________

Please include a check for $900 ($300 per congregation/min. of 3 congregations) with this application. Make check payable to United Church of Christ. Send this completed application and check to:

United Church of Christ
700 Prospect Avenue East
Cleveland, OH 44115
Attention: New Beginnings