

General Assembly Young Adult Advisory Delegate

Application Form

Full Name: _____ Phone: _____

Address: _____

E-mail: _____ Date of Birth _____

Church: _____ City: _____ Member since: _____

List church activities in which you participate: _____

List Presbytery, Synod or General Assembly activities in which you participate: _____

>**Attach** a briefly statement on what being a Christian means to you.

>**Attach** a recommendation from you pastor or clerk of session with your application form.

Will you be able to attend the full time that General Assembly and its committees are in session? _____

- Are you willing to become aware of the issues before the Assembly? _____
- Are you willing to read large amounts of materials in preparation for your work as a YAAD? _____
- Are you willing to attend all meetings of the Assembly and assigned committee? _____
- Will you be available to report on the Assembly at an appropriated meeting of the presbytery, and will you speak to congregations/sessions upon request? _____

Why would you like to be a Young Adult Advisory Delegate (YAAD) to the General Assembly? _____

Please submit by **June 30** to:
Presbytery of Wyoming
P.O. Box 1767
Casper, WY 82602
307-472-4717
or e-mail to: klt@presbywy.org