

Family Information Charge Conference Form _____ (year)

Pastor's Name: _____ Charge: _____
Spouse's Name: _____ Wedding Anniversary: _____
Pastor DOB: _____ Spouse's DOB: _____
E-Mail Address: _____ Personal Email: _____
Church Mailing Address _____ Church Phone: _____
Home Address: (For Part Time Pastors especially) _____

Home Phone: _____ Home Address: _____
If spouse works, place of employment _____ Phone # _____

Children's Names and Birth date: (only list children living at home)

_____ Birthdate: _____
_____ Birthdate: _____
_____ Birthdate: _____
_____ Birthdate: _____

Schools, Colleges, Seminary attended and degrees earned with dates: _____

Previous Appointments (Places and Years) _____

List special interests, hobbies, etc., for both husband and wife: _____

WORSHIP INFORMATION (list each church on the charge separately)

Time of Sunday Worship Service(s): _____ a.m. _____ p.m.

Time of Other Worship Service(s): _____ a.m. _____ p.m.

What is your day off? _____

PARSONAGE INFORMATION

No. Bedrooms _____ No. of Baths _____ No. of Living Areas _____

Fenced Yard _____ Garage 1 car _____ 2 car _____

Condition of the Parsonage (please check)

	Good	Fair	Need repair/ Replacing
Outside Paint	_____	_____	_____
Inside Paint	_____	_____	_____
Carpet	_____	_____	_____
Furniture (overall)	_____	_____	_____
Washer/ Dryer (if furnished)	_____	_____	_____

Other Information you wish to share concerning the parsonage: _____

