



DIOCESE OF NEW ENGLAND

SPECIAL DIOCESAN ASSEMBLY

Holy Trinity Church

New Britain, CT

JUNE 15, 2024

CLERGY (PRIEST/DEACON) REGISTRATION FORM

NAME: _____

ADDRESS: _____

STATE / ZIP: _____

PHONE: () _____

EMAIL: _____

PARISH _____

CITY _____

STATE: _____

SIGNATURE: _____

Please RETURN this form via email by June 10, 2024 to:

alexiatassmer@gmail.com

Any questions please call **Alexia** at 203-623-5336



DIOCESE OF NEW ENGLAND

SPECIAL DIOCESAN ASSEMBLY

Holy Trinity Church

New Britain, CT

JUNE 15, 2024

DELEGATE / ALTERNATE REGISTRATION FORM

(Please circle if you are a delegate or an alternate)

PARISH: _____

CITY _____ STATE: _____

The undersigned has been duly authorized by his/her parish to participate in the Special Diocesan Assembly of the Diocese of New England.

NAME: _____

ADDRESS: _____

CITY _____ STATE / ZIP: _____

PHONE: () _____ EMAIL: _____

Signature of Rector _____

Signature of Parish Secretary _____

PARISH SEAL

APPROVED: _____

Credentials _____

OFFICIAL STATEMENT DELEGATE / ALTERNATE

I am a member of my parish in good standing. I have received the mysteries of Confession and Communion at least annually for the past three years at my home parish. I am not under ecclesiastical interdict. I am not married outside of the Orthodox Church. I am not living in violation of Orthodox moral standards. I am not a member of any anti-church and/or secret societies (such as Masonic organizations.) I have contributed the required fair share remittances to the Orthodox Church in America and to the New England Diocese.

Signature of Delegate / Alternate (Circle One)

Date

(Any departure from the above mentioned qualifications must be explained on a separate sheet of paper by the observer and the Rector and submitted to the Diocesan Bishop (Administrator) through the Credentials Committee for approval by the Bishop or administrator.)

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JUNE 15, 2024

DIOCESAN LAY COUNCIL MEMBER REGISTRATION FORM

NAME: _____

ADDRESS: _____

CITY _____ STATE / ZIP: _____

PHONE: () _____ EMAIL: _____

HOME PARISH: _____

CITY _____ STATE: _____

Signature of Rector _____

Please RETURN this form via email by June 8, 2024 to:

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DIOCESE OF NEW ENGLAND

SPECIAL DIOCESAN ASSEMBLY

Holy Trinity Church

New Britain, CT

JUNE 15, 2024

OBSERVER REGISTRATION FORM

PARISH: _____

CITY _____ STATE: _____

The undersigned observer has been duly authorized by his/her parish to participate in the Special Diocesan Assembly of the Diocese of New England.

NAME: _____

ADDRESS: _____ STATE/ZIP: _____

PHONE: () _____ EMAIL: _____

Signature of Rector _____

PARISH SEAL

Signature of Parish Secretary _____

APPROVED: _____

Credentials _____

OFFICIAL STATEMENT OBSERVER

I am a member of my parish in good standing. I have received the mysteries of Confession and Communion at least annually for the past three years at my home parish. I am not under ecclesiastical interdict. I am not married outside of the Orthodox Church. I am not living in violation of Orthodox moral standards. I am not a member of any anti-church and/or secret societies (such as Masonic organizations.) I have contributed the required fair share remittances to the Orthodox Church in America and to the New England Diocese. I certify that the above information is true. I also understand that as an observer, I may not speak or vote on any matter on the assembly floor.

Signature of Observer _____ **Date** _____

(Any departure from the above mentioned qualifications must be explained on a separate sheet of paper by the observer and the Rector and submitted to the Diocesan Bishop (Administrator) through the Credentials Committee for approval by the Bishop or administrator.)

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