



168TH ANNUAL CONVENTION OF THE EPISCOPAL DIOCESE OF IOWA
ONLINE CONVENTION OCTOBER 24, 2020

RETURN PAGE 1 OF THE COMMUNICANTS FORM TO THE DIOCESAN OFFICE BY SEPTEMBER 15, 2020

PART 1 - COMMUNICANTS

_____ (CHURCH) _____ (CITY), IOWA

OUR CHURCH ___ WILL OR ___ WILL NOT SEND LAY DELEGATE(S) TO THE 168TH ANNUAL CONVENTION IN 2020

OUR CHURCH ___ WILL OR ___ WILL NOT SEND CLERGY DELEGATE(S) TO THE 168TH ANNUAL CONVENTION IN 2020

PART 1: CERTIFICATE OF COMMUNICANTS

Article III, Section 4 of the Constitution

It is Hereby Certified: That the number of communicants in good and regular standing, as shown by our Parish Register as of _____ (date) is _____ which entitles our congregation to _____ lay delegates.

The Cleric or Warden _____,

Title: _____, Date: _____

Each Congregation shall be entitled to one lay delegate for each 75 communicants.

<u>Communicants</u>	<u>Delegates</u>
1-75	1
76-150	2
151-225	3
226-300	4
301-375	5
376-450	6
451-525	7
526-600	8

Part 2 – CERTIFICATION OF LAY DELEGATES is a separate form that should be signed by the Clerk of the Vestry.

Lay Delegates are NOT Certified to vote at the 168th Annual Diocesan Convention until BOTH forms are submitted to the Diocesan Office



168TH ANNUAL CONVENTION OF THE EPISCOPAL DIOCESE OF IOWA
ONLINE CONVENTION OCTOBER 24, 2020

RETURN PAGES 1 AND 2 OF THE CERTIFICATION FORM TO THE DIOCESAN OFFICE BY SEPTEMBER 15, 2020

CERTIFICATION OF DELEGATES FROM A CONGREGATION

_____ (CHURCH) _____ (CITY), IOWA

PART 2: CERTIFICATION OF LAY DELEGATES

Article III, Sections 3, 4, and 5 of the Constitution & Canon 2

It is Hereby Certified: That at a meeting of the Vestry/Bishop's Committee, the below named Lay Member(s), being confirmed adult communicants in good standing and qualified elector(s), are duly elected to vote on behalf of this church's Vestry as Lay Delegate(s) to the 168th Convention of the Episcopal Church, in the Episcopal Diocese of Iowa, for the year 2020.

The Clerk* _____, Title: _____, Date: _____

If the members of your delegation change after submitting this form, simply submit another signed Certification Form. The form with the later date will supersede the earlier one automatically. Payments will automatically be applied to the new Delegate(s).

*It is also permissible for this form to be signed by the Rector or Cleric of a congregation.

LAY DELEGATES

<i>First Name</i>	<i>Last Name</i>	<i>Email Address (for your ZOOM/VOTER account)</i>	<i>Phone number during convention</i>	
1) _____	_____	_____	_____	Text OK?: Y / N
Mail Address, City, State, Zip: _____				
2) _____	_____	_____	_____	Text OK?: Y / N
Mail Address, City, State, Zip: _____				
3) _____	_____	_____	_____	Text OK?: Y / N
Mail Address, City, State, Zip: _____				
4) _____	_____	_____	_____	Text OK?: Y / N
Mail Address, City, State, Zip: _____				
5) _____	_____	_____	_____	Text OK?: Y / N
Mail Address, City, State, Zip: _____				
6) _____	_____	_____	_____	Text OK?: Y / N
Mail Address, City, State, Zip: _____				
7) _____	_____	_____	_____	Text OK?: Y / N
Mail Address, City, State, Zip: _____				
8) _____	_____	_____	_____	Text OK?: Y / N
Mail Address, City, State, Zip: _____				

ALTERNATE LAY DELEGATES

<i>First Name</i>	<i>Last Name</i>	<i>Email Address (for your ZOOM account)</i>	<i>Phone number during convention</i>
1) _____ Text OK?: Y / N			
This alternate delegate: ___ DOES or ___ DOES NOT plan to attend Convention as a visitor until called upon to replace a Lay Delegate			
2) _____ Text OK?: Y / N			
This alternate delegate: ___ DOES or ___ DOES NOT plan to attend Convention as a visitor until called upon to replace a Lay Delegate			
3) _____ Text OK?: Y / N			
This alternate delegate: ___ DOES or ___ DOES NOT plan to attend Convention as a visitor until called upon to replace a Lay Delegate			

REGISTRATION OF CANONICALLY RESIDENT CLERGY DELEGATES TO CONVENTION

<i>First Name</i>	<i>Last Name</i>	<i>Email Address (for your ZOOM/VOTER account)</i>	<i>Phone number during convention</i>
1) _____			
2) _____			
3) _____			

REGISTRATION OF VISITORS (who are not an Alternate Delegate)

<i>First Name</i>	<i>Last Name</i>	<i>Email Address (for your ZOOM account)</i>	<i>Phone number during convention</i>
1) _____ Text OK?: Y / N			
Mail Address, City, State, Zip: _____			
2) _____ Text OK?: Y / N			
Mail Address, City, State, Zip: _____			
3) _____ Text OK?: Y / N			
Mail Address, City, State, Zip: _____			
4) _____ Text OK?: Y / N			
Mail Address, City, State, Zip: _____			
5) _____ Text OK?: Y / N			
Mail Address, City, State, Zip: _____			

	Cost	Number of Delegates	TOTAL	TOTAL DUE
Delegation Fee per Delegate eligible to vote	\$10.00 per delegate (clergy or lay)			
TOTAL Delegation Fee				

Mail payment by check and both pages of the Signed Certification Form to:
 Episcopal Diocese of Iowa – Convention Registration
 225 37th Street
 Des Moines, IA 50312

[Link to online payment](#)