



2025 VOTING DELEGATE CREDENTIAL FORM

City: _____ Church: _____

LAY DELEGATES

This is to certify that the following were elected as **lay delegate and alternate lay delegate** or in the case of a multi-congregation parish, an **advisory lay delegate** to the 63rd Convention of the Texas District, The Lutheran Church—Missouri Synod from June 5-7, 2025 in Houston, Texas.

Lay Delegate Name: _____

Address: _____

Email: _____ Cell#: _____

Lay Alternate Name: _____

Address: _____

Email: _____ Cell#: _____

Multi-Congregation Parish

Advisory Lay Delegate Name: _____

Address: _____

Email: _____ Cell#: _____

PASTORAL DELEGATE

This is to certify that the pastor listed below has been regularly called by this Texas District LCMS congregation and authorized to serve as the pastoral delegate.

Pastoral Delegate Name: _____

Address: _____

Email: _____ Cell#: _____

Signatures: _____

(Wet Signatures Required) Congregation Officer #1

Congregation Officer # 2

NOTE: Pursuant to Synod Bylaw 4.2.2, for proper delegate accreditation this signed form shall be mailed for receipt at the Texas District office (1221 Satellite View, Round Rock, TX 78665) no later than **May 5, 2025**, or presented at convention registration. This is required to receive credentials for the voting delegates.

FOR OFFICE USE:

Date Received: _____ Date Entered: _____ By: _____