

**DIOCESE OF TASMANIA**  
**ESSENTIAL PARISH INFORMATION**

**To be returned to the Diocesan Registrar by 30 September 2008**

If you wish to receive an email version of this form please contact  
[registry@anglicantas.org.au](mailto:registry@anglicantas.org.au)

Parish Name .....

Parish postal address .....

..... Postcode .....

Phone (office) ..... Fax (office).....

Email (office) .....

Incumbent .....

Date of Annual Meeting .....

Number of people on electoral roll  
on the date of the 2008 Annual Meeting .....

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**Other stipendiary clergy**

Name/s .....

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**Non-stipendiary clergy**

Name .....

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**Other paid staff (eg Administrator, organist etc)**

Name ..... Position.....

Name ..... Position.....

Name ..... Position.....

Name ..... Position.....

Authorised Lay Ministers - ie people who have been licenced within your parish to perform a specific ministry function:

Name .....Type of ministry .....

Name .....Type of ministry .....

Name .....Type of ministry .....

Name .....Type of ministry .....

*(If insufficient space, please attach a separate list)*

Parish Secretary

Name .....

Home address.....

.....Postcode .....

Phone (home).....

Phone (work).....

Mobile .....

Email .....

Please tick your preference for receipt of mail  Home address  Parish address

Parish Treasurer

Name .....

Home address.....

.....Postcode .....

Phone (home).....

Phone (work).....

Mobile .....

Email .....

Please tick your preference for receipt of mail  Home address  Parish address

NB: If your parish has specific instructions regarding where to send mail relating to Parish Invoices, Statements and Trustee Statements, please advise below. Otherwise these items will be forwarded to the Treasurer’s preferred address.

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.....  
.....

**Rector's Warden**

Name .....  
Home address .....  
..... Postcode .....  
Phone (home) .....  
Phone (work) .....  
Mobile .....  
Email .....

Please tick your preference for receipt of mail     Home address     Parish address

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**People's Warden 1**

Name .....  
Home address .....  
..... Postcode .....  
Phone (home) .....  
Phone (work) .....  
Mobile .....  
Email .....

Please tick your preference for receipt of mail     Home address     Parish address

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**People's Warden 2**

Name .....  
Home address .....  
..... Postcode .....  
Phone (home) .....  
Phone (work) .....  
Mobile .....  
Email .....

Please tick your preference for receipt of mail     Home address     Parish address

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## Synod Representative 1

Name .....

Home address .....  
..... Postcode .....

Phone (home) .....

Phone (work).....

Mobile .....

Email .....

Please tick your preference for receipt of mail     Home address     Parish address

Emergency contact details (required for RISK MANAGEMENT purposes for Synod)

Name .....

Telephone number/s .....

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## Synod Representative 2

Name .....

Home address .....  
..... Postcode .....

Phone (home) .....

Phone (work).....

Mobile .....

Email .....

Please tick your preference for receipt of mail     Home address     Parish address

Emergency contact details (required for risk management purposes for Synod)

Name .....

Telephone number/s .....

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**Synod Representative 3 (if applicable - ie 120 or more persons on parish role)**

Name .....  
Home address .....  
..... Postcode .....  
Phone (home) .....  
Phone (work) .....  
Mobile .....  
Email .....

Please tick your preference for receipt of mail     Home address     Parish address

**Emergency contact details (required for risk management purposes for Synod)**

Name .....  
Telephone number/s .....

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**Synod Alternate 1**

Name .....  
Home address .....  
..... Postcode .....  
Phone (home) .....  
Phone (work) .....  
Mobile .....  
Email .....

Please tick your preference for receipt of mail     Home address     Parish address

**Emergency contact details (required for risk management purposes for Synod)**

Name .....  
Telephone number/s .....

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## Synod Alternate 2

Name .....

Home address .....  
..... Postcode .....

Phone (home) .....

Phone (work) .....

Mobile .....

Email .....

Please tick your preference for receipt of mail     Home address     Parish address

Emergency contact details (required for risk management purposes for Synod)

Name .....

Telephone number/s .....

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## Safe Ministry Coordinator

Name .....

Home address .....  
..... Postcode .....

Phone (home) .....

Phone (work) .....

Mobile .....

Email .....

Please tick your preference for receipt of mail     Home address     Parish address

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## Children & Families Ministry Coordinator

Name .....

Home address .....  
..... Postcode .....

Phone (home) .....

Phone (work) .....

Mobile .....

Email .....

Please tick your preference for receipt of mail     Home address     Parish address

**Youth Ministry Coordinator**

.....  
Name .....  
Home address .....  
..... Postcode .....  
Phone (home) .....  
Phone (work).....  
Mobile .....  
Email .....

Please tick your preference for receipt of mail     Home address     Parish address

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**Missions Contact**

Name .....  
Home address .....  
..... Postcode .....  
Phone (home) .....  
Phone (work).....  
Mobile .....  
Email .....

Please tick your preference for receipt of mail     Home address     Parish address

**CERTIFICATE OF DETERMINATION BY A PARISH ANNUAL MEETING CONCERNING  
THE RIGHT OF APPOINTMENT OF AN INCUMBENT**

CERTIFICATE "A" - to be used in cases where Nomination is vested in THE BISHOP

I HEREBY CERTIFY that the right of appointing an incumbent to the Parish of ..... should a vacancy occur, was duly vested by a meeting of the Parish Annual Meeting on ..... in THE BISHOP and this determination shall remain until such time as it may be renewed or changed as a result of a future request from the Bishop for determination of Nomination.

Dated this ..... day of ..... 2007

Signed .....  
Chair of the Meeting

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CERTIFICATE "B" - to be used in cases where Nomination is vested in  
A COMMITTEE OF NOMINATION

I HEREBY CERTIFY that the right of appointing a Rector to the Parish of ..... should a vacancy occur was duly vested by a meeting of the Parish Annual Meeting on ..... in the Bishop through the COMMITTEE OF NOMINATION for the Mission Region of ..... and this determination shall remain until such time as it may be renewed or changed as a result of a future request from the Bishop for determination of Nomination, and I further certify that the following Lay Communicants of the Parish, viz.,

<u>SURNAME</u>	<u>CHRISTIAN NAMES</u>	<u>POSTAL ADDRESS</u>
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1. ....
2. ....
3. ....

were duly elected to represent the Parish of ..... on the said Nomination Committee until such time as others are elected in their place or this present determination is reversed. The following three Lay Communicants of the Parish were elected to act in ORDER OF PRIORITY in the event of any of those elected above being unable to act, viz,

4. ....
5. ....
6. ....

Dated this ..... day of ..... 2007

Signed .....  
Chair of the Meeting