



Change of Parish Council Executive Form

Name of Parish Council: _____

City/Town: _____ Council Code: _____

Name of Person Submitting Form: _____

Position of Person Submitting Form: _____ Date Submitted: _____

Term of Office: **2019 – 2020**
President

2020-2021
President

Name: _____

Name: _____

Membership ID #: _____

Membership ID #: _____

Mailing Address: _____

Mailing Address: _____

City/Town: _____

City/Town: _____

Province/Territory: _____

Province/Territory: _____

Postal Code: _____

Postal Code: _____

E-mail: _____

E-mail: _____

Telephone: _____

Telephone: _____

Treasurer

Treasurer

Name: _____

Name: _____

Membership ID #: _____

Membership ID #: _____

Mailing Address: _____

Mailing Address: _____

City/Town: _____

City/Town: _____

Province/Territory: _____

Province/Territory: _____

Postal Code: _____

Postal Code: _____

E-mail: _____

E-mail: _____

Telephone: _____

Telephone: _____

Spiritual Advisor

Spiritual Advisor

Name: _____

Name: _____

Membership ID #: _____

Membership ID #: _____

Mailing Address: _____

Mailing Address: _____

City/Town: _____

City/Town: _____

Province/Territory: _____

Province/Territory: _____

Postal Code: _____

Postal Code: _____

E-mail: _____

E-mail: _____

Telephone: _____

Telephone: _____