National Board/Committee – Change of Officer/Affiliation Form

[ ] Change of Officer Form ***OR*** **[ ]** Affiliation Form

 **PLEASE TYPE OR PRINT**

**NATIONAL EXECUTIVE BOARD/COMMITTEE OF**

 **(Country)**

**AGLOW ID #**       **DATE**

PresidentVice President/Leadership Dev. Coor.

Name       Name

Address       Address

City       Country       City       Country

Phone       E-Mail       Phone       E-Mail

Church & Denomination       Church & Denomination

Languages you speak       Languages you speak

 CoordinatorSecretary

Name      Name

Address       Address

City       Country      City       Country

Phone       E-Mail       Phone       E-Mail

Church & Denomination       Church & Denomination

Languages you speak       Languages you speak

Aglow Prayer CoordinatorTreasurer

Name       Name

Address       Address

City       Country       City      Country

Phone       E-Mail       Phone       E-Mail

Church & Denomination       Church & Denomination

Languages you speak       Languages you speak

Coordinator Coordinator

Name       Name

Address      Address

City      Country      City      Country

Phone      E-Mail      Phone      E-Mail

Church & Denomination       Church & Denomination

Languages you speak       Languages you speak

**National Advisor: Optional- No Longer Required as of August 2025**

Rev/Mr.

Phone

Address

Name of Church

Denomination

Signature

**Mail to:**

Global Field Office– International
Aglow International
P.O. Box 1749
Edmonds, WA 98020-1749, USA

**International Office approval:**

*Signature*

*Title      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Date Approved* *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*