

# CELEBRATION LEADERSHIP TEAM

*The following people have been selected to serve as members of our Church Leadership Team.*  
Mail or deliver to the Celebration Office by \_\_\_\_\_.

## CONGREGATIONAL LEADER:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone \_\_\_\_\_

## CHILDREN'S LEADER:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone \_\_\_\_\_

## PRAYER LEADER:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone \_\_\_\_\_

## STUDENT LEADER:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone \_\_\_\_\_

## TRAINING LEADER:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone \_\_\_\_\_

## LIST SUBMITTED BY:

Pastor \_\_\_\_\_  
Church \_\_\_\_\_  
Church Address \_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_  
Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**Mailing Address:** P.O. Box 2227, 76097-2227  
**Street Address:** 244 S.W. Wilshire Boulevard, Burleson, TX 76028  
**Phone:** 817-447-3480 **Fax:** 817-447-3999  
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