

**OLDER ADULT REPRESENTATIVE for the
CELEBRATION OF AGING, May 2, 2012**

Florissant Presbyterian Church, Florissant, Missouri

A person who represents the contributions of Older Adults to the life and mission of the Church

CHURCH_____

ADDRESS_____

CITY/TOWN_____ZIP_____

PHONE_____ E-MAIL_____

CRITERIA FOR OLDER ADULT HONOREE

1. Any faithful member of a church within the Presbytery
2. Sixty years or more of experience in the art of living
3. Service in church and community
4. Positive impact upon others in church and community
5. Love of God, self, and neighbor

Honoree from Your Church

NAME_____

ADDRESS_____

CITY/STATE_____

PHONE_____ E-MAIL_____

Please write TWO or THREE sentences which highlight your honoree=s most outstanding contributions.

The Session of _____ Church, submits this person as our honoree at the Celebration of Aging.

Signed _____, Clerk of Session Date: _____

MAIL TO: The Presbytery of Giddings-Lovejoy, Attn: Cindy Corley, 2236 Tower Grove Ave., St. Louis, MO 63110

FORM DUE NO LATER THAN APRIL 20, 2012

CELEBRATION OF AGING MEAL RESERVATION FORM



Please mail all forms and check to:

The Presbytery of Giddings-Lovejoy, Attn: Cindy Corley

2236 Tower Grove Avenue, St. Louis, MO 63110

Enclosed please find a check, made out to the Presbytery of Giddings-Lovejoy, in the amount of \$_____ for _____ reservations at \$9.00 each for the following persons:

Please list the names of the people that are attending from your church (due to space, attendance is limited to 4 persons per church).

1. Your Church=s Honoree: _____

2. Pastor or Elder/Deacon: _____

3. Guest: _____

4. Guest: _____

Name of Church _____

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2012 CELEBRATION OF AGING CENTENARIANS

Each year at the Celebration of Aging, the Presbyterian Older Adult Ministry Network lists members in our congregations who are at least 100 years old.

If you have a centenarian in your congregation, please fill out the form below and return to Cindy Corley, The Presbytery of Giddings-Lovejoy, 2236 Tower Grove Ave., St. Louis, MO 63110.

CHURCH _____

CITY _____

NAME

BIRTH DATE

_____	_____
_____	_____
_____	_____
_____	_____

PLEASE RETURN FORM BY APRIL 20, 2012