



The Society Of Saint Vincent de Paul

National Council of the United States

Conference REACTIVATION

Diocesan Council of _____

District Council of _____

Conference Name _____

Conference Address _____

Conference City/State/Zip _____

E-Mail _____ **Phone** _____

Parish Name _____
(If different from the Conference name)

Original Founding Date _____

Aggregation Date _____
(Must provide verification previously aggregated)

Date Conference Reactivated _____

Date of Application _____

As conditions of membership in the Society of St. Vincent de Paul, we the members of this **reactivated** conference agree to:

- Follow the Rule, bylaws, structure and spirit of the Society.
- Meet regularly and consistently, usually weekly, but at least twice a month.
- Adopt attached bylaws, inserting appropriate information and changing nothing.
- Apply for aggregation after twelve months (***if proof of previous aggregation cannot be verified**) of service to those living in poverty and after submitting first Conference annual report.
- Submit an annual report on time every year.
- Make annual solidarity contributions in a timely manner.
- Attend an Ozanam Orientation within six months.
- Participate in ongoing formation and training.
- Participate as member of a Council.
- Maintain membership information on National database.
- Establish a 501(c)(3) tax-exemption.

Reactivated Conference Members

OFFICERS NAMES: President _____
Vice Pres _____
Treasurer _____
Secretary _____
Spiritual Adv _____

(Provide contact info below)

Name:
Address
City/State/Zip
E-Mail
Phone No
Signature

Name:
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City/State/Zip
E-Mail
Phone No
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Name:
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E-Mail
Phone No
Signature

Attach additional sheets if necessary

Received at National Council by: _____ Date _____

Please submit to:

National Council of the United States
Society of St. Vincent de Paul, Inc.
58 Progress Parkway
Maryland Heights, MO 63043