Northwestern Minnesota Synod
Evangelical Lutheran Church in America

Vice Pastor-Church Agreement Form

CONGREGATION/PARISH NAME: _____

PASTOR'S NAME: _____

Please indicate which Pastoral Positions are needed:

- ☐ Pastoral Care
- ☐ Emergency Care (hospice, accidents)
- ☐ Funeral
- ☐ Council Help
- ☐ Confirmation teaching
- ☐ Wedding

Other: _____

_____

PASTORAL COMPENSATION:

$50/contact hour

$175/service (wedding, funeral) Round trip

mileage: Current IRS Rate

Pastor: _____

President: _____

Date: _____