



CONGREGATIONAL COVENANT

PLEASE PRINT:

Church Name _____

Church City _____

Participant's Name _____

- We understand that our pastor is first a person on a spiritual journey.
- We understand that a congregation/pastor relationship is based upon mutual trust, support, and nurture.
- We understand that healthy pastors sustain healthy congregations, and healthy congregations help to sustain healthy communities.
- We understand that healthy pastors need to be encouraged to take regular time off with family, annual vacation time, and to have an equitable sabbatical plan.
- We understand that if our pastor is going to participate in the SHAPE program, it will require a certain level of prayer support and require a certain level of financial support.
- We understand that participation in the SHAPE program may require additional time away and commit to release our pastor for this time.
- We are aware of our pastor's covenant with SHAPE and support this covenant statement.
- We commit to provide financial resources.
- We commit to prayer and encouragement for our pastor on this journey.
- We understand that this will require time away that will be determined in a mutual process involving the pastor, the church, and the Regional SHAPE Center.
- We understand that participation in the SHAPE program will include such things as:
 - **Strengthening** the pastor's spiritual, physical, and emotional self for further excellent pastoral ministry;
 - **Entering** into mentor/mentoree relationships with other pastors;
 - **Furthering** their understanding of the Bible, theology, church growth, spiritual formation, and ministry development;
 - **Articulating** a vision for excellent pastoral leadership;
 - **Developing** a pastoral life plan for current and future ministry; and
 - **Participating** in an assets-building model for effective ministry.
- We understand, that in order for our pastor to participate in the SHAPE program our congregation will commit \$ _____ *per year for a minimum of three years.*
 - For congregations of 25 or less \$ 50.00
 - For congregations of 26 - 50 100.00
 - For congregations of 51 -75 150.00
 - For congregations of 76-100 200.00
 - For congregations of 101 - 150 250.00
 - For congregations of 151 - 300 300.00
 - For congregations of 301 - 500 400.00
 - For congregations of 501 and above 500.00
- We understand that the congregation will be asked by the Regional SHAPE Center to participate in research gathering and assessment of our local congregation.

Therefore,

We covenant to support, encourage, and hold accountable our pastor as he/she participates in the SHAPE program.

Signed _____
(Congregational Representative)

Date _____

Print name _____

Title _____

Please return completed form to:

SHAPE Administrator
 N. California Association of the Church of God
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 Lodi, CA 95240
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