



A CALL

CATAWBA PRESBYTERY

**ASSOCIATE REFORMED PRESBYTERIAN
CHURCH**

We the officers and members of The Catawba Presbytery Committee on Church Extension being well satisfied with your ministerial qualifications, and confident that we have been led to you by the Holy Spirit as one whose ministry will be profitable to our spiritual interest, do earnestly call you _____ to undertake the call as Mission Developer in Catawba Presbytery for _____. On the acceptance of this our call we promise you in the discharge of your duty all proper support, encouragement, and obedience in the Lord.

That you may devote yourself wholly to the Ministry of the Word as you begin your ministry on the ____ day of _____, 20____, we promise and obligate ourselves to:

1. Basic compensation: [Select a or b].
 - a. When a manse is provided
 - 1) Base Salary \$_____ Provide you with the free use of a manse with utilities, and insurance coverage, commonly called tenant homeowners, in an amount of not less than \$40,000 or an amount equal to the actual replacement value of the minister's owned contents.
 - 2) Travel allowance of \$_____
 - b. When a housing allowance is provided it may be divided to the best interest of the minister and shall provide
 - 1) Total Compensation of \$_____ which includes
 - a. Base Salary \$_____
 - b. Housing Allowance \$_____
 - c. Travel Allowance \$_____
2. Pay your moving expenses.
3. Pay into the Associate Reformed Presbyterian Retirement Plan Fund as prescribed by the General Synod.
4. Pay 100% of Synod's life, health, and dental insurance for the pastor and his family, but with the following proviso that if a minister's spouse has group insurance that covers her and/or their dependents for medical and/or dental insurance that it be permitted for the minister to participate and waive medical and/or dental insurance under the single rather than family category of insurance; and the Church will be responsible for reimbursing the family of the pastor for their portion of the insurance premiums; and further, the pastor may also elect to remain under his wife's policy if he is covered as a dependent and the church assumes responsibility for reimbursing their portion of the insurance premiums, provided the minister's insurance package is supplemented to include dental, disability and life insurance.

[Select a, b or c]:

___a. Provide Synod's life, and health, and dental, insurance package for the pastor and his family.

- ___ b. Pastor waives ___ medical and/or ___ dental coverage under Synod's group policy for his dependents who are covered under the spouse's group policy with reimbursement of the costs by the Church for the dependents.
- ___ c. Pastor waives ___ medical and/or ___ dental coverage under Synod's group policy for himself and his dependents who are covered under the spouse's group policy and the church reimburses the pastor for the costs.
5. ___ week[s] to be away for evangelistic or other church related meetings.
6. One week and expenses for continuing education
7. Review with you annually the adequacy of this compensation. As part of the review the congregation **shall provide a cost of living adjustment to the previous year's base salary** based on the amount of the cost of living adjustment provided by Synod's Director of the Associate Reformed Presbyterian Center.
8. Grant you an annual vacation of ___ weeks.
9. Expenses for the meeting of General Synod.
10. Other [List each item]
11. In the event of total disability, as defined in the Synod's insurance program, we promise:
- a. ___ To continue **for a minimum of three months** the provisions of this call awaiting commencement of benefits from Synod's insurance program.
- b. ___ If you are residing in the manse, and during the month following the terms outlined in "a" above, to assist you in relocating and to contribute **a minimum of up to one month's base salary** toward your relocation expenses.
- c. ___ Other [Attach]
12. In the event you should die during the terms of this call, we promise:
- a. ___ To continue the provisions of this call dealing with annual salary, housing, and group insurance for your immediate family **for a minimum of three months.**
- b. ___ If you are residing in the manse, and during the month following the term outlined in "a" above, to assist your immediate family in relocating and/or contribute **a minimum of up to one month's base salary** toward these relocation expenses.
- c. ___ Other. [Attach]

In testimony whereof we have respectively subscribed our names this ___ day of _____
A. D. _____.

ALL OFFICIAL CALLS TO PRESBYTERY POSTIONS MUST BE SIGNED BY:

All members of the Committee issuing the call.

CONFIRMATION OF A CALL
CATAWBA PRESBYTERY

I, _____ having moderated the Church Extension Committee meeting held in the _____ Associate Reformed Presbyterian Church, at _____ on _____ at _____ which a call was extended to _____, for services as _____, certify that the call has been made in all respects according to the Form of Government of the Associate Reformed Presbyterian Church and the Rules of Procedure of Catawba Presbytery, and that the persons who signed the call were members in regular standing of the above-mentioned congregation.

Moderator of Congregational Meeting

Date

OFFICIAL VOTE:

In Favor _____ Opposed _____

<u>MEMBERS OF THE COMMITTEE ON CHURCH EXTENSION:</u>	