

Short form

Annual Church Profile 2020

Please send completed form to your local association office.

Profile For: (Check One) Church Mission

Name Of Church/Mission _____

Telephone Number _____ Church Twitter Acct _____

Email Address _____ Website _____

Mailing Address (St., PO Box No.) _____

City _____ State _____ Zip _____

Street Add. (Physical Add. or "911" Add. – do not use PO box) _____

City _____ State _____ Zip _____

Association _____

Statistical Profile *Please fill in all relevant information.*

- | | | |
|--|--|---|
| 1. Total Members _____ | 7. VBS Enrollment _____ | 10. Total SBC Mission Giving Expenditures (Great Commission Giving) |
| 2. Resident Membership _____ | 8. Mission Project Participation | a. Cooperative Program _____ |
| 3. Baptisms | a. Local Community _____ | b. Assoc Missions _____ |
| a. 11 years and under _____ | b. State _____ | c. State Missions _____ |
| b. 12 to 17 years _____ | c. U.S. & Canada _____ | d. Annie Armstrong _____ |
| c. 18 to 29 years _____ | d. Outside U.S. & Canada _____ | e. Lottie Moon _____ |
| d. 30 and up _____ | Total Mission Project Participation _____ | f. Other SBC Miss. Exp. _____ |
| Total Baptisms _____ | 9. Total Giving/Gifts | Total SBC Mission Giving Exp. _____ |
| 4. Other Additions _____ | a. Undesignated Giving/Gifts _____ | 11. Non SBC Mission Exp. _____ |
| 5. Weekly Worship Attendance _____ | b. Designated Giving/Gifts _____ | |
| 6. Sunday School/Bible Study/Small Group _____ | Total Giving/Gifts _____ | |

1. Total Membership Total of both resident and nonresident membership.

2. Resident Membership All members who live close enough to your congregation to attend.

3. Total Baptisms Total number of baptisms during the 2019-2020 reporting year. (Add Items 3a-3d).

4. Other Additions Number who became members of your congregation during the 2019-2020 reporting year by ways other than baptism (letter of transfer, statement, etc.).

5. Weekly Worship Attendance Average number in the weekly worship service(s). If not kept, use the attendance for the last Sunday of the 2019-2020 reporting year.

6. Sunday School/Bible Study/Small Group

Attendance Average number attending Sunday school, Bible study, small group or cell group each week during the 2019-2020 reporting year. Include all ages from babies to adults but not counting anyone twice.

7. VBS Enrollment Number enrolled in Vacation Bible School for your congregation.

8. Total Mission Project Participation Total number of persons (male and female) in your congregation who participated in mission projects (such as World Changers, Disaster Relief, Baptist Builders, Acteens Activators,

Volunteer Connection, construction, church planting, evangelism, Bible clubs, surveys, etc.). Persons may be counted for each mission project in which they participated (Add Items 8a-8d).

9. Total Giving/Gifts Total amount of all money received by the congregation. This amount should be the total of undesignated gifts, designated gifts, and other receipts (may include income from rentals, day school or kindergarten fees, savings, pastoral aid, parking fees, etc.).

a. Undesignated Giving/Gifts: Total amount of all tithes and offerings not designated by individuals. This includes regular budget offerings and loose monies from the offering.

b. Designated Giving/Gifts: Total amount of all designated tithes and offerings given by individuals. Designated receipts are gifts which the individual decides how the money will be spent. Lottie Moon, Annie Armstrong, State Missions, building fund, and debt retirement are examples of designated giving.

10. Total SBC Mission Giving Expenditures (Great Commission Giving) Total amount of all money given during the 2019-2020 reporting year to all Southern Baptist mission causes by the congregation. This includes monies given to: Cooperative Program, Annie Armstrong, and Lottie Moon PLUS monies given to associations, state

conventions (such as a State Mission Offering), and any other Southern Baptist mission cause. (Add Items 10a-10f).

a. Cooperative Program Giving Total amount of all money given through the Cooperative Program during the 2019-2020 reporting year.

b. Assoc Missions Total amount of all money given to Associational Missions.

c. State Missions Total amount of all money given to the North Carolina Missions Offering (State Missions Offering).

d. Annie Armstrong Easter Offering Total amount of money given to the Annie Armstrong Easter Offering for North American missions.

e. Lottie Moon Christmas Offering Total amount of money given to the Lottie Moon Christmas Offering for International missions.

f. Other SBC Mission Expenditures Total amount of money given to any other SBC mission cause not reported in items a through e.

11. Non SBC Mission Expenditure Total amount of all money given to non-Southern Baptist Convention mission causes by your congregation. An example would be Samaritan's Purse.

Leadership Profile *Please fill in all relevant information.*

Please list persons for the NEW associational year (2020-2021). *Email addresses provided will be used for N.C. Baptist mass email communication.*

Senior Pastor

Preferred Title: _____ Start Date: _____

Bivocational Licensed Ordained Interim

Be sure to give your main pastor's name, address, and telephone number. Check Bivocational if your pastor is employed at another job in addition to your congregation.

Salutation: Dr, Rev, Mr, Mrs, Ms, Miss _____ Name _____

Mailing Address (St., Rt, Box No.) _____

City _____ State _____ Zip _____

Telephone Number _____ Email Address _____ Pastor Twitter Acct. _____

Church Secretary

Preferred Title: _____ Start Date: _____

Volunteer (Not Paid) Part-Time (paid) Full-Time

Your congregation may have more than one secretary. If so, give the name of the secretary who handles most congregational matters.

Salutation: Dr, Rev, Mr, Mrs, Ms, Miss _____ Name _____

Mailing Address (St., Rt, Box No.) _____

City _____ State _____ Zip _____

Telephone Number _____ Email Address _____

Deacon Chairperson

Preferred Title: _____ Start Date: _____

Salutation: Dr, Rev, Mr, Mrs, Ms, Miss _____ Name _____

Mailing Address (St., Rt, Box No.) _____

City _____ State _____ Zip _____

Telephone Number _____ Email Address _____

Church Clerk

Preferred Title: _____ Start Date: _____

Salutation: Dr, Rev, Mr, Mrs, Ms, Miss _____ Name _____

Mailing Address (St., Rt, Box No.) _____

City _____ State _____ Zip _____

Telephone Number _____ Email Address _____

Church Treasurer

Preferred Title: _____ Start Date: _____

Salutation: Dr, Rev, Mr, Mrs, Ms, Miss _____ Name _____

Mailing Address (St., Rt, Box No.) _____

City _____ State _____ Zip _____

Telephone Number _____ Email Address _____

If you have any questions or concerns, please contact:

Russell Schwab
rschwab@ncbaptist.org
(800) 395-5102 ext. 5582

Becki Canterberry
bcanterberry@ncbaptist.org
(800) 395-5102 ext. 5593



Baptist State Convention of North Carolina • Milton A. Hollifield, Jr., Executive Director-Treasurer
205 Convention Drive, Cary, NC 27511 • (919) 467-5100 • (800) 395-5102 • www.ncbaptist.org

The missions and ministries of the Baptist State Convention of North Carolina are made possible by your gifts through the Cooperative Program and the North Carolina Missions Offering.