

2017 SDB Directory of Churches Information Form

Please fill this form out **LEGIBLY** and in its entirety by March 1, 2017.

It may be returned by email to jpethel@seventhdaybaptist.org

or mail it to: PO Box 1678, Janesville, WI 53547.

Failure to return this form by its deadline may result in a reduction in the allotment of delegates to our annual General Conference sessions. If you have questions, please contact John Pethel, Director of Church Development.

Legal Name of Church: _____

Operating Name of Church (if different from legal name): _____

Year the Church was Organized: _____ Year the Church joined General Conference: _____

Church Meeting Address: _____

Church Mailing Address: _____

Church Phone: _____ Church Email: _____

Church Website: _____

Church Facebook: _____ Church Twitter: _____

Other Church Social Media: _____

Church Meeting Times: _____

Does your church have audio recordings of sermons online? Yes No

If so, where are they located: _____

Does your church livestream or have video recordings of its worship service online? Yes No

If so, where are they located: _____

Lead Pastor Name: _____

Lead Pastor Mailing Address: _____

Lead Pastor Phone: _____ Type: Home Mobile

Lead Pastor Email: _____ Does this pastor serve full time? Yes No

Please list other serving pastors with the same contact information: _____

President or Moderator Name: _____

President or Moderator Mailing Address: _____

President or Moderator Phone: _____ Type: Home Mobile

President or Moderator Email: _____

Clerk or Secretary Name: _____

Clerk or Secretary Mailing Address: _____

Clerk or Secretary Phone: _____ Type: Home Mobile

Clerk or Secretary Email: _____

Treasurer Name: _____

Treasurer Mailing Address: _____

Treasurer Phone: _____ Type: Home Mobile

Email: _____

Christian Education Contact Name: _____
Christian Education Contact Mailing Address: _____
Christian Education Contact Phone: _____ Type: Home Mobile
Christian Education Contact Email: _____

Youth Leader Name: _____
Youth Leader Address: _____
Youth Leader Phone: _____ Type: Home Mobile
Youth Leader Email: _____

Worship Leader Name: _____
Worship Leader Address: _____
Worship Leader Phone: _____ Type: Home Mobile
Worship Leader Email: _____

Missions Advocate Name: _____
Missions Advocate Address: _____
Missions Advocate Phone: _____ Type: Home Mobile
Missions Advocate Email: _____

Church Development Advocate Name: _____
Church Development Advocate Address: _____
Church Development Advocate Phone: _____ Type: Home Mobile
Church Development Advocate Email: _____

Christian Social Action Keyworker Name: _____
Christian Social Action Keyworker Address: _____
Christian Social Action Keyworker Phone: _____ Type: Home Mobile
Christian Social Action Keyworker Email: _____

Women's Leader Name: _____
Women's Leader Address: _____
Women's Leader Phone: _____ Type: Home Mobile
Women's Leader Email: _____

Accredited Ministers: _____
Ordained (but not Accredited) Ministers: _____
Licensed Ministers: _____
Deacons/Deaconesses: _____

Is this church's beliefs in accord with the current SDB Statement of Belief? Yes No

Does the church own its own meeting place? Yes No
Does the church own a parsonage? Yes No

Avg. Worship Attendance during 2016: _____ Active Membership as of January 1, 2017: _____
Avg. Sabbath School (or Christian Education) Attendance during 2016: _____