Short form Annual Church Profile 2023 Profile For: (Check Ope)

Profile For: Church (Check One)



Name Of Church/Mission	Telephone Number		
Ethnicity	Language		
	hurch Facebook 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
County	Association		
·			

Statistical Profile

1._____Total Members 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 2022-2023 reporting year. (Add Items 3a-3d).

3a	11 years and under	3c	18 to 29 years
3b	12 to 17 years	3d	30 and up

4.____**Other Additions** Number who became members of your congregation during the 2022-2023 reporting year by ways other than baptism (letter of transfer, statement, etc.).

5. _____In-Person Weekly Worship Attendance Average number in the weekly worship service(s). If not kept, use the attendance for the last Sunday of the 2022-2023 reporting year.

6.____Online Weekly Worship Attendance Average number in the weekly worship service(s) online due to the pandemic during the 2022-2023 reporting year.

7. _____In-Person Sunday School/Bible Study/Small Group Average number attending Sunday school each week during the 2022-2023 reporting year. This may be a Sunday school class, Bible study, small group or similiar group. Include all ages from babies to adults but not counting anyone twice.

8. ____Online Sunday School/Bible Study/Small Group Average number participating in the weekly Bible Study online during the 2022-2023 reporting year. This may be a Sunday school class, Bible study, small group or similiar group.

9. _____VBS Enrollment Number enrolled in Vacation Bible School for your congregation.

10._____**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 10a-10d).

 10a._____Local Community
 10c._____National

 10b._____State
 10d._____International

11._____Total WMU/Women's Ministry Enrollment Total number of Women members and leaders enrolled in the 2022-2023 reporting year.

12._____**Total Baptists on Mission Ministries Enrollment** Total number of all persons enrolled in all BOM projects and activities. Include members and leaders of disaster relief, and all age groups involved in missions sponsored by BOM.

13.____**Missionaries Sent** How many missionaries has your church sent during the reporting period?

14.____**Churches Planted** How many churches has your congregation planted during the reporting period?

*Highlighted content indicates essential recording information

15._____**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.).

15a._____**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.

15b._____**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.

16. ______Total SBC Mission Giving Expenditures (Great

Commission Giving) Total amount of all money given during the 2022-2023 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 16a-16f).

16a.____**Cooperative Program Giving** Total amount of all money given through the Cooperative Program during the 2022-2023 reporting year.

16b._____**Assoc Missions** Total amount of all money given to Associational Missions.

16c._____**State Missions** Total amount of all money given to the North Carolina Missions Offering (State Missions Offering).

16d._____**Annie Armstrong Easter Offering** Total amount of money given to the Annie Armstrong Easter Offering for North American missions.

16e.____**Lottie Moon Christmas Offering** Total amount of money given to the Lottie Moon Christmas Offering for International Missions.

16f. _____Other SBC Mission Expenditures Total amount of money given to any other SBC missions cause not reported in items a through e.

17. _____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.

18.	Does your congregation require background checks for all those	
	working with children & students?	No No
19.	Currently, have your congregation's staff and those who work with	Yes

children and students all been trained in reporting sexual abuse cases?

20. Currently, have your congregation's staff and those who work with children and students all been trained in caring for survivors of sexual abuse?

Leadership Profile Please fill in all relevant information.

Please list persons for the NEW associational year (2023-2024). Email addresses provided will be used for N.C. Baptist mass email communication.

	Preferred Title:		wed at another job i			
	e 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 congreg Ilutation: Dr, Rev, Mr, Mrs, Ms, Miss Name Name					
City			State	Zip		
Telephone Number	Email Address		Pastor Twitter Acct			
Volunteer (Not Paid)	Preferred Title: Part-Time (paid) Full-Time te than one secretary. If so, give the name of the secretary		regational matters.			
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						
Mailing Address (St., Rt. Box No.)						
-				Zip		
		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		



If you have any questions or concerns, please contact:

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