

# Annual Church Profile 2020

To enter online, go to:  
<http://nc.sbcworkspace.com>

User Name: \_\_\_\_\_

Password: \_\_\_\_\_

Profile For: (Check One)  Church  Mission

Name Of Church/Mission \_\_\_\_\_ Ethnicity \_\_\_\_\_

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 \_\_\_\_\_

County \_\_\_\_\_ Association \_\_\_\_\_

## Statistical Profile

<p>1. Total Members _____</p> <p>2. Resident Membership _____</p> <p>3. Baptisms _____</p> <p>    a. 11 years and under _____</p> <p>    b. 12 to 17 years _____</p> <p>    c. 18 to 29 years _____</p> <p>    d. 30 and up _____</p> <p>        Total Baptisms _____</p> <p>4. Other Additions _____</p> <p>5. Weekly Worship Attendance _____</p> <p>6. Sunday School/Bible Study/Small Group _____</p> <p>7. VBS Enrollment _____</p>	<p>8. Mission Project Participation</p> <p>    a. Local Community _____</p> <p>    b. State _____</p> <p>    c. U.S. &amp; Canada _____</p> <p>    d. Outside U.S. &amp; Canada _____</p> <p>        Total Mission Project Participation _____</p> <p>9. Total WMU Enroll. _____</p> <p>10. Total Embrace/Women's Min. Enroll. _____</p> <p>11. Total Baptists on Mission Min. Enroll. _____</p> <p>12. Total Giving/Gifts</p> <p>    a. Undesignated Giving/Gifts _____</p> <p>    b. Designated Giving/Gifts _____</p> <p>        Total Giving/Gifts _____</p>	<p>13. Total SBC Mission Giving Expenditures (Great Commission Giving)</p> <p>    a. Cooperative Program _____</p> <p>    b. Assoc Missions _____</p> <p>    c. State Missions _____</p> <p>    d. Annie Armstrong _____</p> <p>    e. Lottie Moon _____</p> <p>    f. Other SBC Miss. Exp. _____</p> <p>        Total SBC Mission Giving Exp. _____</p> <p>14. Non SBC Mission Expenditures _____</p>
--	--	--

**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** 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** Average number attending Sunday school each week during the 2019-2020 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.

**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 WMU Enrollment** Total number of Women Missionary Union members and leaders enrolled in the 2019-2020 reporting year.

**10. Total Embrace/Women's Ministry Enrollment** Total number of Embrace/Women's Ministry members and leaders enrolled in the 2019-2020 reporting year.

**11. 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.

**12. 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.

**13. 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 13a-13f).

**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 missions cause not reported in items a through e.

**14. 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.

# Supplemental Survey

Historical Events of Interest During Associational Year New Bldg., Dedications, Ordinations for Ministry, New Ministries Started, etc.

---

---

---

---

---

---

---

---

## Mission(s) Operated by the Church *Include pastor's name and address.*

Mission Name	Pastor's Name	Street, Rt, Box No.	City, State, Zip
_____	_____	_____	_____
_____	_____	_____	_____

## Members Deceased During the Year *Give names of congregational members who died during the 2019–2020 associational year. Indicate Mr., Mrs., Deacon, etc. and identify ordained ministers with the title Rev.*

Name	Date	Name	Date	Name	Date
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

The names and addresses collected on this form are used to compile the official denominational lists of church staff and other positions. Associations, state conventions, and SBC agencies use these names and addresses to communicate with persons about meetings, services, and products in which they may have an interest. Most persons find these communications to be helpful. Lists are not made available to individuals or groups outside of the denomination.

## Leadership Profile *Please fill in all relevant information.*

- If two people occupy a staff position, put one person's name in the appropriate place on the form and put the second person's name in the space labeled "Other Positions or Roles."
- If your congregation employs any professional staff member(s) not listed on the form, please list name, address, and title of each on the "Other Positions or Roles" section.

**Senior Pastor** Preferred Position Title: \_\_\_\_\_ Start Date: \_\_\_\_\_

Bivocational  Licensed  Ordained  Interim

*Be sure to give your main pastor's name, address, and telephone number. If the pastor is there only for a short time until your congregation finds a pastor, please mark Interim above. Check Bivocational if your pastor is employed at another job in addition to your congregation.*

Circle: Dr. Rev. Mr. Mrs. Ms. Miss Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_ Pastor Twitter Acct. \_\_\_\_\_

**Music** Preferred Title: \_\_\_\_\_ Start Date: \_\_\_\_\_

Volunteer (Not Paid)  Part-Time (paid)  Full-Time  Ordained  Licensed  Bivocational

Circle: Dr. Rev. Mr. Mrs. Ms. Miss Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**Youth**

Preferred Title: \_\_\_\_\_ Start Date: \_\_\_\_\_

 Volunteer (Not Paid)  Part-Time (paid)  Full-Time  Ordained  Licensed  Bivocational

Circle: Dr. Rev. Mr. Mrs. Ms. Miss Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**Children**

Preferred Title: \_\_\_\_\_ Start Date: \_\_\_\_\_

 Volunteer (Not Paid)  Part-Time (paid)  Full-Time  Ordained  Licensed  Bivocational

Circle: Dr. Rev. Mr. Mrs. Ms. Miss Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**Preschool**

Preferred Title: \_\_\_\_\_ Start Date: \_\_\_\_\_

 Volunteer (Not Paid)  Part-Time (paid)  Full-Time  Ordained  Licensed  Bivocational

Circle: Dr. Rev. Mr. Mrs. Ms. Miss Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**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.*

Circle: Dr. Rev. Mr. Mrs. Ms. Miss Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**Sunday School Leader**

Preferred Title: \_\_\_\_\_ Start Date: \_\_\_\_\_

Circle: Dr. Rev. Mr. Mrs. Ms. Miss Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**Embrace Women's Ministry or Woman's Missionary Union (WMU) Leader** *Please choose your Women's Ministry.*  Embrace  WMU

Preferred Title: \_\_\_\_\_ Start Date: \_\_\_\_\_

Circle: Dr. Rev. Mr. Mrs. Ms. Miss Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**Deacon/Elder Chairperson**

Preferred Title: \_\_\_\_\_ Start Date: \_\_\_\_\_

Circle: 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: \_\_\_\_\_

Circle: Dr. Rev. Mr. Mrs. Ms. Miss Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**Stewardship Chairperson** *The Stewardship Chairperson may also be known as Budget Chairperson, Finance Committee Chairperson, etc.*

Preferred Title: \_\_\_\_\_ Start Date: \_\_\_\_\_

Circle: 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: \_\_\_\_\_

Circle: Dr. Rev. Mr. Mrs. Ms. Miss Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**Other Positions or Roles** *For additional positions, please use a separate sheet of paper.*

Position \_\_\_\_\_ Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_ Start Date: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Position \_\_\_\_\_ Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_ Start Date: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Position \_\_\_\_\_ Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_ Start Date: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Position \_\_\_\_\_ Name \_\_\_\_\_

Mailing Address (St., Rt, Box No.) \_\_\_\_\_ Start Date: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_



North Carolina Baptists

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.

**If you have any questions or concerns, please contact:**

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

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

Church	City	Association
--------	------	-------------

**YES, MY CHURCH INFORMATION HAS BEEN ENTERED ON THE SBC WORKSPACE.**

## 2020-2021 Church Year Baptists on Mission Church Leaders Mailing List Form

All persons on this mailing list, **plus your pastor**, will receive *Baptists on Mission* magazine with information about mission opportunities, Disaster Relief, and events for adults, youth, and kids. To include your leadership on our mailing list, please enter on SBC Workspace website **OR** complete the form and return to:

**Baptists on Mission, PO Box 1107, Cary, NC 27512-1107. See instructions on back.**

**We have no active organization at this time but please send information to the Church Missions Contact person listed below.**

### CHURCH MISSIONS CONTACT PERSON

**CMC**

Name		
Address		
City	State	Zip
Telephone	Email	

### ADULT COED MISSIONS CONTACT

**ACL**

Name		
Address		
City	State	Zip
Telephone	Email	

### BAPTIST MEN / MEN'S MINISTRY DIRECTOR

**BMD**

Name		
Address		
City	State	Zip
Telephone	Email	

### WOMEN'S MISSIONS LEADER

**WML**

Name		
Address		
City	State	Zip
Telephone	Email	

### COED YOUTH MISSION LEADER – coed missions grades 7-12

**CYL**

Name		
Address		
City	State	Zip
Telephone	Email	

### CHALLENGERS LEADER – boys grades 7-12

**CHL**

Name		
Address		
City	State	Zip
Telephone	Email	



Church	City	Association
--------	------	-------------

**ROYAL AMBASSADOR DIRECTOR – grades 1-6**  **RAD**

Name			
Address			
City		State	Zip
Telephone		Email	

**CRUSADER LEADER – grades 4-6**  **CRL**

Name			
Address			
City		State	Zip
Telephone		Email	

**LAD LEADER – grades 1-3**  **LAD**

Name			
Address			
City		State	Zip
Telephone		Email	

**COED CHILDREN MISSIONS LEADER – coed missions grades 1-6**  **MKL**

Name			
Address			
City		State	Zip
Telephone		Email	

**Important Instructions:**

1. Please list the requested information for the persons who will serve in the upcoming NEW church year.
2. **NOTE:** Please delete names of those no longer serving in positions of leadership as you enter new updates on the SBC Workspace.
3. If your church does not have a Baptist Men, Women’s Missions, Youth, Children, Coed missions program of any kind, please indicate that on this form by checking the box at the top of the form and return for our records. Even if there are no men or boys’ or coed mission programs in your church, please list someone (other than pastor) that would be willing to serve as a missions contact and receive mail from our office about these activities. You will find a place for this in the first block labeled **Church Missions Contact Person**.
4. **Please check box at the top of this form if information has already been added by you via SBC Workspace.**
5. If you have any questions about the Baptists on Mission leadership positions, please contact Lynn Tharrington: 919.459.5599; [ltharrington@ncbaptist.org](mailto:ltharrington@ncbaptist.org)



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](http://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.

NCBM/Baptists on Mission • Richard Brunson, Executive Director  
 205 Convention Drive • Cary, NC 27511 • (800) 395-5102

[www.baptistsonmission.org](http://www.baptistsonmission.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