

## LOCAL CHURCH MEMBERSHIP REPORT

Name \_\_\_\_\_ Student ID (Chapel) Number \_\_\_\_\_

Date of Report (Month/Day/Year) \_\_\_\_\_

1. Name of the church you are CURRENTLY ATTENDING:

\_\_\_\_\_

2. Name of the PASTOR of the church you are CURRENTLY ATTENDING:

\_\_\_\_\_

3. Give the LOCATION of the church you are CURRENTLY ATTENDING:

\_\_\_\_\_

4. Are you a CURRENT MEMBER of the church mentioned above? (Check One.)

Yes \_\_\_\_\_ No \_\_\_\_\_

**Answer the following ONLY if you answered NO to question #4 above.**

1. Write the name of the church where you are a CURRENT MEMBER:

\_\_\_\_\_

2. Write the name of the PASTOR of the church where you are a CURRENT MEMBER:

\_\_\_\_\_

3. Give the LOCATION of the church you are CURRENTLY ATTENDING:

\_\_\_\_\_

**Special Note Regarding Due Date**

This report is due the seventh Friday after the beginning of each semester. Please see the Christian Service Director if you are unable to meet this requirement.