



District of Columbia Baptist Convention

Annual Church Report 2019

Information from September 1, 2018 – August 30, 2019

Due date September 15, 2019

NAME OF CHURCH:

Pastor:

Church mailing address:

Church meeting address:

Employer ID Number (EIN):

Phone:

Fax:

E-mail:

Website:

This annual Report collects statistical, leadership, and financial information. The data is widely used for variety of purposes, including:

- Developing strategic priorities, programming, and initiatives for DCBC's work with member congregations.
- Determining **five** Council of Church Representatives for the Annual Gathering.
- Regional and national directories (DCBC and ABC)
- Statistical reporting within DCBC and national bodies. Statistics results are often used by funders.
- Congregational Profiles for pastoral search committees and strategic planning.
- Per capita calculations for financial reports and recognitions.
- Provide historical information for your church.

Our denominational bodies benefit from having the most accurate collective information possible on our congregations. Please carefully review and enter requested information.

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DC Baptist Convention

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Statistics

NAME OF CHURCH: _____

MEMBERSHIP INFORMATION	RACIAL/ETHNIC <i>(Check boxes that apply)</i>
Total Church Membership:	<input type="checkbox"/> African (Specify) _____
Total Resident Active Members :	<input type="checkbox"/> Asian (Specify) _____
Total Resident Inactive Members :	<input type="checkbox"/> Black (African American) _____
New Member by Baptism:	<input type="checkbox"/> Caucasian (European American) _____
New Member by Letter or Other:	<input type="checkbox"/> Hispanic/Latino _____
Member Lost by Death:	<input type="checkbox"/> Other _____
Member lost by letter or other:	
BAPTISMS	FINANCIAL INFORMATION <i>(Round dollar amount to nearest dollar.)</i>
11 Years and under:	a. Church Budget: _____
12 to 17 years of age:	b. Gift to DCBC: _____
18 to 29 years of age:	c. Gift to NCAMO (The Blessing): _____
30 and up	<i>DCBC offers a plethora of trainings throughout the year. A few of the trainings are listed below. Please check any classes of interest:</i>
TOTAL BAPTISMS:	<input type="checkbox"/> Church Clerk
SUNDAY SCHOOL/BIBLE STUDY/SMALL GROUPS	<input type="checkbox"/> Deacon/Deaconess
Children (Birth – 11):	<input type="checkbox"/> Disaster Relief
Youth (12 – 17):	<input type="checkbox"/> Grant Writing/Funding
Young Adults:	<input type="checkbox"/> Human Resource
Adults:	<input type="checkbox"/> Trustee
Seniors:	<input type="checkbox"/> Usher
Total Average Attendance:	<input type="checkbox"/> Vacation Bible School

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Programs

NAME OF CHURCH: _____

CHILDREN & YOUTH		OUTREACH/MISSIONS	
Vacation Bible School Enrollment (All Participants):		<i>Check the box(es) that apply and provide details below.</i>	
Title of Program: Frequency:		<input type="checkbox"/> ADVOCACY	
Title of Program: Frequency:		<input type="checkbox"/> BENEVOLENCE	
Title of Program: Frequency:		<input type="checkbox"/> COMMUNITY	
TOTAL PROGRAMS:		<input type="checkbox"/> FOOD	
		<input type="checkbox"/> EVANGELISM	
		<input type="checkbox"/> HOMELESS	
YOUNG ADULT (18 - 35)		OUTREACH/MISSION DETAILS	
Title of Program: Frequency:		<i>Provide details for checked box(es) above. Outcome indicates the number of people served.</i>	
Title of Program: Frequency:		a. Title: b. Purpose: c. Outcome:	
Title of Program: Frequency:		a. Title: b. Purpose: c. Outcome:	
Title of Program: Frequency:		a. Title: b. Purpose: c. Outcome:	
Title of Program: Frequency:		a. Title: b. Purpose: c. Outcome:	
TOTAL PROGRAMS:		a. Title: b. Purpose: c. Outcome:	
ADULT/SENIORS/OTHER PROGRAMS		a. Title: b. Purpose: c. Outcome:	
Title of Program: Frequency:		a. Title: b. Purpose: c. Outcome:	
Title of Program: Frequency:		a. Title: b. Purpose: c. Outcome:	
Title of Program: Frequency:		a. Title: b. Purpose: c. Outcome:	
Title of Program: Frequency:		a. Title: b. Purpose: c. Outcome:	
Title of Program: Frequency:		a. Title: b. Purpose: c. Outcome:	
Title of Program: Frequency:		a. Title: b. Purpose: c. Outcome:	
TOTAL SENIOR PROGRAMS:		Total Outreach/Mission Programs: _____	
TOTAL OTHER PROGRAMS:			

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Church Staff Leadership Directory

NAME OF CHURCH: _____

Listings of Elected Officers are requested on the next page.

Please list staff who is “permanently” employed with primary responsibility for broad areas of the church’s ministry such as: Pastoral, Music, Education (Adult, Youth, Children, Small Groups), Administration (Secretary, Business Manager), Directors for Women’s and Men’s Ministries, Community Outreach. Please use additional sheet if needed.

ORDAINED STAFF

Position: _____ Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____
Position: _____ Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____
Position: _____ Part Time: <input type="checkbox"/> Full Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____
Position: _____ Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____
Position: _____ Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____
Position: _____ Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____

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Elected Leadership Directory

NAME OF CHURCH: _____

Please update our listing of elected laity who have primary responsibility for leadership areas of the church's ministry such as: Music, Education (Adult, Youth, Children, Small Groups), Administration & Finance (Church Clerk, Treasurer), Directors for Women's & Men's Ministries, Community Outreach, Vacation Bible School, Chairpersons of Deacons & Trustees, etc.

Please use additional sheet if needed.

Position: Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name:
	Address:
	Home Phone: <input type="checkbox"/> Unlisted
	Cell Phone: <input type="checkbox"/> Unlisted
	Email Address:
Position: Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name:
	Address:
	Home Phone: <input type="checkbox"/> Unlisted
	Cell Phone: <input type="checkbox"/> Unlisted
	Email Address:
Position: Part Time: <input type="checkbox"/> Full Time: <input type="checkbox"/>	Title & Name:
	Address:
	Home Phone: <input type="checkbox"/> Unlisted
	Cell Phone: <input type="checkbox"/> Unlisted
	Email Address:
Position: Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name:
	Address:
	Home Phone: <input type="checkbox"/> Unlisted
	Cell Phone: <input type="checkbox"/> Unlisted
	Email Address:
Position: Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name:
	Address:
	Home Phone: <input type="checkbox"/> Unlisted
	Cell Phone: <input type="checkbox"/> Unlisted
	Email Address:
Position: Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name:
	Address:
	Home Phone: <input type="checkbox"/> Unlisted
	Cell Phone: <input type="checkbox"/> Unlisted
	Email Address:

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Other Ordained Ministers

NAME OF CHURCH: _____

Please list names and addresses of all other ordained ministers who are members of your church and indicate all appropriate **STATUS** designations:

CH – Chaplain (military, hospital, factory, institution, college, etc.)
CW – Convention Worker (person working for ABC, BWA, PNBC or SBC),
EM – Evangelist (Music),
EP – Evangelist (Preaching),
I – Inactive,
O – Other church-related worker (pastoral, counselor, seminary student, teacher of Bible, etc.),
PI – Part-time Interim (for a short time),
R – Retired,
SW – State Worker (person working for any DCBC agency or institution).

OTHER CHURCH MEMBERS WHO ARE ORDAINED MINISTERS

Title & Name	Status:
Address:	Phone:
Title & Name:	Status:
Address:	Phone
Title & Name	Status:
Address:	Phone:

CHURCH MEMBERS ORDAINED DURING 2019

Title & Name	Status:
Address:	Phone:
Title & Name:	Status:
Address:	Phone
Title & Name	Status:
Address:	Phone:

MINISTERS DECEASED DURING 2019

Name:
Name:

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Annual Letter

NAME OF CHURCH: _____

Please write a **one-page** letter **using bullet dots style** about what has happened of significance in your church during the past 12 months. It could include pastoral changes, new buildings or programs, spiritual developments, or what-ever church wishes to record. This letter will be permanently bound and kept as a significant historical document by the DC Baptist Convention. It will be useful to persons compiling a history of your church and/or the DC Baptist Convention.

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Annual Gathering Representative Registration

NAME OF CHURCH:

District of Columbia Baptist Convention Annual Gathering
Thursday & Friday
October 24-25, 2019
Clifton Park Baptist Church

No.	Name(s)
1.	
2.	
3.	
4.	
5.	

“Active member churches in good standing are entitled to five voting representatives, one representative to be the Senior Pastor or his/her designee, the other representative chosen according to the member-church’s polity.” Bylaws Article 6.3

Member churches are encouraged to send as many non-voting participants as they wish to the Annual Gathering. Non-voting participants may speak, but have no vote.